

BALANCING LIFE:  
PERCEPTIONS AND PRACTICES OF HEALTH AMONG YOUNG ADULT YUP'IK WOMEN

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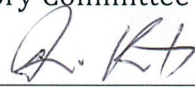
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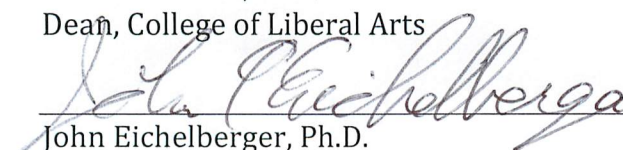
  
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A  
THESIS

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By

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## **Abstract**

Ten years ago CANHR (Center for Alaska Native Health Research) asked Yup'ik men and women of all ages how they would define health and wellness; that is, what it means to be well and happy. The answers were largely centered on living a subsistence lifestyle, eating subsistence foods and respecting natural spirits and lands. Today a new generation of young Yup'ik women has emerged. A generation that has grown up in villages and cities with store-bought food available next to subsistence food, TV, and Internet. In this study young adult Yup'ik women's perceptions of health and their use of dancing as a practice of health are investigated. This study looks at how this new generation of young adult Yup'ik women understand health. Young adult Yup'ik women's perceptions and practices of health, such as dancing, are examined to determine what these women consider important to stay healthy and how the notion of health itself can be understood.

Ideas of what it means to the subjects comprising the study population to be healthy are crucial to understand before conducting any kind of health research. How people interpret, navigate and understand the very notion of health must be uncovered in order to work with them on any and all health issues. As such the notion of health cannot and should not be conceptualized as the mere presence or absence of disease but includes instead a wide network of social, spiritual, physical, mental, and emotional factors. Consequently, this study approaches health from a holistic perspective implementing a wide network of factors in the investigation of young, adult, Yup'ik women's perceptions and practices of health.



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## **Chapter 1 Introduction**

Ten years ago CANHR (Center for Alaska Native Health Research) asked Yup'ik men and women of all ages how they would define health and wellness; that is, what it means to be well and happy (Wolsko et al. 2006). The answers were largely centered on living a subsistence lifestyle, eating subsistence food and respecting natural spirits and lands. Today a new generation of young adult Yup'ik women has emerged; a generation that has grown up in villages and cities with store-bought food available next to subsistence food, TV, and Internet. In this study young adult Yup'ik women's perceptions of health and their use of dancing as a practice of health are investigated. An important first step in any health research is to understand ideas of what it means to be healthy, for how people interpret, navigate and understand the very notion of health is vital in order to work with them on health issues. Perceptions and practices of how to stay healthy are at the foundation of health research. In order to implement public health strategies or health education, basic notions of health and how to stay healthy must be understood and used as premises for health strategies and education. Young adult Yup'ik women's ideas on health and how to stay healthy are analyzed to get to a greater understanding of what it means to be and stay healthy as a young adult Yup'ik woman. This study also looks at how dancing is connected to health and might promote and enhance such young women's health. Dancing is furthermore investigated as a practice of health to show how health is a holistic notion.

This study is based on two assumptions. First, young adult Yup'ik women, whether they are aware of it or not, take on health-crucial roles as mothers, providers, organizers, and food preparers in many families and communities. Second, the perceptions and practices of health of young adult Yup'ik women are defining for the health of larger groups of Yup'ik people. As such, their strategies for staying healthy are important to understand in order to approach any



health-related topic within Yup'ik communities. Young adult Yup'ik women's perceptions of health, as well as dancing as a practice of health, are investigated in an effort to understand how they think about and approach health. This study looks at how these young women's perceptions and practices of health are constituted within a worldview in which Yup'ik traditions and beliefs exist mixed with Western, particularly Alaskan, traditions and beliefs. Finally, the young adult Yup'ik women, about which this study revolves, represent some of the stronger, healthier individuals of their generation and their perceptions and practices of health are interpreted as such.

Based on the above, this study investigates the following questions:

1. What can be identified as young, adult, Yup'ik women's perceptions and practices of health and what do these indicate about the notion of health itself?
2. How can dancing be understood as a practice of health and to what extent does such practice influence the notion of health?

### **1.1 Motivation for and significance of studying Yup'ik women's health**

This study was designed based upon my desire to improve the health of indigenous women. I considered different approaches and topics but kept coming back to the fact that before taking on any topic of health it is relevant to know how health is conceptualized – that is, what “health” means to the people being studied. After all, how can I improve health if I do not understand what it means to be healthy for indigenous women, particularly Yup'ik women, in Alaska? The motivation for doing this study also came from my wide review of research topics, which indicated that young adult indigenous women are underrepresented demographically in research, especially their perceptions of health, thereby giving an important demographic group no voice in planning of public health programs and education. The greatest personal motivation

for writing this thesis and undertaking the fieldwork that preceded it was the health challenges I have faced myself within the last four years and the realization of my own capabilities and strengths in the process of overcoming them. As a young adult woman I started thinking about other women's health and how they perceive it. What made me recover was not only Western medicine and Freudian therapy, but a holistic approach to and scrutiny of my body, mind and soul that helped me regain my footing and move beyond the limitations that had been set for me so far. I was introduced to new ideas of what health is and how a person can live, eat, act, and think to stay healthy. A world of strengths and possibilities was opened to me and this study is my continued way of learning about health as well as a continuation of spreading diverse knowledge about health.

The significance of this study is evident on several levels. First, there is not much research on young adult Yup'ik women's health. Research projects on Yup'ik people's health in general exist (Wolsko et al. 2006, 2007), as well as broader projects on circumpolar health (Bjerregaard & Young 1998, Bjerregaard et al. 2004, Hild & Stordahl 2004, Waldram et al. 2006), but research projects that focus specifically on Yup'ik women are almost non-existent. This study will help to fill that void and contribute to a growing body of literature on circumpolar indigenous women's health and wellbeing.

Second, previous research projects often primarily focus on health *problems*; the negative aspects of health that indigenous communities experience today as well as in the past (Anderson 2010, Chandler & Lalonde 1998, Chateau-Degat et al. 2011, Healey & Meadows 2007, Jolly et al. 2011, Kemberling et al. 2011, Plante et al. 2011, Tester & McNicoll 2004, Wang et al. 2003). In the article *Suspending Damage: A Letter to Communities* (2009), Professor of Education at

New York State University Eve Tuck writes about damage-centered research and its effects on the people studied. She writes that minorities being studied are:

Invariably portrayed as either victims or perpetrators. These characterizations frame our communities as sites of disinvestment and dispossession; our communities become spaces in which under-resourced health and economic infrastructure are endemic. They become spaces saturated in the fantasies of outsiders (Tuck 2009:412).

This quote shows the extent to which minority groups, such as indigenous communities, in research are portrayed predominantly in a negative light as either without agency as victims or using their agency for evil as perpetrators. Here, the quote is meant to direct attention to the fact that research has created an overriding negative portrayal of indigenous communities and this is something I actively eschew throughout this study. Tuck continues to explain how even researchers with the best of intentions of helping the people they are studying end up perpetuating this negative portrayal by focusing on problems in indigenous communities. This kind of “research invites oppressed peoples to speak but to ‘only speak from that space in the margin that is a sign of deprivation, a wound, an unfulfilled longing” (Tuck 2009: 413). This study is significant because it encourages Yup’ik women to speak of their strengths: their strategies for staying healthy. It is my belief that by focusing on those strengths and by building on the knowledge that young women already possess, strategies for how to be healthy and what it means to be healthy can be emphasized in more significant ways. In other words I believe in starting with what works and building from there instead of starting with what does not work. This is not to say that it is unimportant to be aware of what does not work, for health problems in the circumpolar north are great and they should be seriously acknowledged. After all, the point of doing a project on health is to somehow improve it, but this study is significant because it moves

beyond a mere analysis of health issues to an analysis of how to overcome them. As such, this study seeks to provide an analysis of the knowledge and practices that Yup'ik people have to build upon and to move beyond different health issues. It is a study of their strengths and possibilities. The tradition of studying strengths and possibilities is not new in Alaska. Particularly CANHR, with such activities as the People's Awakening Project, has been a leading force in developing health research that focuses on positive and strengthening aspects of community health (Mohatt et al. 2004).

## **1.2 Epistemological considerations**

I work from an empirical perspective throughout this study: This means that I let Yup'ik women explain and define what health is and what it means to be healthy rather than operating with an already established definition of health. Using inductive logic, I work through empirical findings to establish a theory. In the literature review I look at past empirical data that has already been written and researched about Yup'ik people. In the analysis I look at the empirical data I have gathered and what that data tells me about Yup'ik women's health. In this way the study is founded upon social constructivism. John Creswell writes:

The goal of the [social constructivist] research is to rely as much as possible on the participants' views of the situation being studied. The questions become broad and general so that the participants can construct the meaning of a situation, typically forged in discussion or interactions with other persons (Creswell 2008:8).

Social constructivism is based on the idea that individuals engage and make sense of the world around them by way of the historical, social and cultural perspectives instilled in them (Creswell 2008:8-9). It can be a difficult perspective to work with because new constructions can always be found: different interpretations can always be made, and nothing is ever "true". A certain

amount of positivistic assumptions might therefore also be found in this study. I base my analysis on empirical findings and those, I believe to be true in the specific time and space, while keeping in mind the extent I have participated to their construction. I also acknowledge that sometimes there are things that cannot be explained by looking solely at empirical data. This is especially the case when dealing with perceptions and practices, which are phenomena that my research partners simply are not aware of or able to express. This is where theoretical perspectives might be of help and where they are drawn upon in this study. One cannot talk about health unless one knows what that means within a particular context. Therefore this study takes on a largely discursive approach. It looks at how a small number of Yup'ik women talk about, describe, and approach health in conversation as well as while performing certain practices<sup>1</sup>.

The study of health is also a study of culture, for perception of health is perceived based upon the cultural background of the perceiver. Culture should here be understood as something that is constantly developing and changing. It is both something abstract that cannot be seen as well as something practical like a dance. In the 19<sup>th</sup> century culture was defined by Edward B. Tylor as “that complex whole which includes knowledge, belief, art, morals, law, custom, and any other capabilities and habits acquired by man as a member of society” (Tylor 1871:1). In the 20<sup>th</sup> century Clifford Geertz offers a different interpretation of culture, arguing that culture is semiotic: “Believing, with Max Weber, that man is an animal suspended in webs of significance he himself has spun, I take culture to be those webs, and the analysis of it to be therefore not an experimental science in search of law but an interpretive one in search of meaning” (Geertz

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<sup>1</sup> The point of this study is not to demonstrate that all Yup'ik people share a specific notion of health. Nor do I claim that all young adult Yup'ik women conceive of health in the same way as my research partners do. It follows that, the results of this analysis should not be taken as final or automatically generalizable. The notion of health appears to be ever changing and cannot be essentialized. As such my research captures this notion in a specific environment and at a specific moment in time, as defined by a small group of Yup'ik women who are in the “young adult” phase of their life.

1973:5). Geertz defines culture as a web of meanings encoded into actual social situations and these can be defined by describing and interpreting social situations (Hastrup 2004:12). As such, my analysis is inspired by Geertz' notion of culture: interpreting the empirical first and foremost. Culture is a fundamentally difficult concept because it means very different things to different people, disciplines and sciences. Perhaps more problematic, culture's ontology (what culture is) and culture's epistemology (how culture can be understood) are drifting apart, making it difficult for anyone to agree on what culture really is (Hastrup 2004:13). In this thesis culture is conceptualized as a habitus that guides the individual in his or her decisions and actions. Culture is also approached as actual practices such as dancing or subsistence activities. As such, this conceptualization of culture takes cues from both the ontological and the epistemological.

### **1.3 Defining central research terms**

#### **1.3.1 Young adult**

The population that is the focus of this study is *young adult* Yup'ik women. The description "young adult" should be understood as women who have made the transition from childhood/youth into adulthood by getting a job, getting married, having a child or in other ways defined themselves as young adults. This is an analytical category that I specifically use for this research. The title is intentionally vague, because I do not pre-define what specific set of individuals identify as young adult Yup'ik women. Who am I to decide that such individuals must be between the ages of 18-24 for example? Or that Yup'ik means that one has two Yup'ik parents? Instead I let the women decide. I have encouraged young adult Yup'ik women to participate in this study and they have come to me, self-identifying as "young adult Yup'ik women". Therefore, since the subjects themselves define the analytical category it might also be considered an emic category. The young women in this study are between the ages of 28 and 32.

Some are mothers; some are not. Some have one Yup'ik parent; some have two. What is important is that the women in this study decided that they fit the category; that is, they self-identify as young adult Yup'ik women.

### **1.3.2 Yup'ik**

I am examining the perceptions and practices of health of young adult *Yup'ik* women. The term Yup'ik should be understood, like the term young adult, emically, meaning that it is people who define themselves as being Yup'ik. They might have one Yup'ik parent or two; they might have grown up in Yup'ik villages or they might not; they might be engaged in Yup'ik cultural activities or they might not. Just as my research partners define themselves as young adults, they define themselves as Yup'ik representing all of the above variations of what that might mean.

### **1.3.3 Women**

I focus on young adult Yup'ik *women* in this study of perceptions and practices of health. As such, it is a study developed from a feminist perspective. I believe that it is relevant to specifically examine Yup'ik women's perceptions and practices of health because they often serve as the gatekeepers of health. They are often the one's in charge of raising children, preparing food, keeping houses, organizing activities, and earning incomes and as such they have an important role in their own, their families' and their communities' health. By targeting women in this study I show how they have important roles and valuable ideas in connection to health and I also empower them to pursue those roles and ideas further. A common issue in health research is that gender similarities are assumed, meaning that results from, for example, a study of diabetes done on men in a particular city can automatically be transferred to women with diabetes in the same city. An actual study of women's diabetes, treatments and outcomes remains to be done

and consequently women are incorrectly treated based on the mistaken assumption of similarities with men. On the other hand, differences can also be falsely assumed: Women tend to live longer than men and therefore develop more non-fatal diseases, while men more often die of fatal disease before they develop non-fatal diseases (Ruiz & Verbrugge 1999:107). Therefore research on non-fatal diseases have focused on women and assumed that men were not as affected by non-fatal diseases while in fact they are (that is, when they live to experience them). Ruiz and Verbrugge (1999) further explain that because lists of symptoms and patient's explanations of their symptoms are predominantly based on male case studies, women are often mistreated, misdiagnosed and considered difficult patients when their symptoms and explanations of symptoms do not fit with (male) explanations of symptoms and (male) lists of symptoms for a certain disease. Ruiz and Verbrugge explain that, "It is assumed women are healthier but have worse perceptions of their health" (1999:107).

Arctic indigenous women's health, as well as women's health in a broader perspective, has often been examined through a domestic/public dichotomy. In 1974 anthropologist Michelle Rosaldo suggested that in most societies social and cultural contexts could be looked at through a dichotomy of women in a domestic sphere and men in a public sphere (Brettel & Sargent 2009:85). Anthropologist Louise Lamphere and Rosaldo herself later argued that such a dichotomy assumes too much and offers too narrow a perspective to produce a realistic analysis of what must be regarded as a complex reality. Lamphere writes about how the dichotomy of domestic and public is bound up in Western culture in general and in a Victorian heritage in particular. The dichotomy may have a point in the West, although very simplified, but cross-culturally there is not always a pattern of division between domestic and public (Lamphere 1993:90-92). Quoting Rayna Rapp, Lamphere puts this eloquently when she writes:



A Tanzanian female farmer, a Mapuche woman leader, and an American working-class housewife do not live in the same domestic domain nor will the social upheavals necessary to give them power over their lives be the same. We must simultaneously understand the differences and the similarities, but not reduce them to one simple pattern (Lamphere 1993:94).

Albeit not universal, the theory of domestic and public spheres has continued to be influential and is still a point of reference in feminist discussions of gender today. The divisions between domestic and public spheres have changed significantly and men and women's roles in either have as well to a point where it is relevant to question whether there is an actual gendered division between public and private spheres. As indicated above, I consider women's roles in both domestic and public spheres looking at, for example, how they earn incomes as well as cook and organize households. Research on women's health cannot exclusively look at work within the domestic sphere such as child rearing, household work and cooking or exclusively look at women in a public sphere of work environments, clubs or politics. Women's health is connected to social roles and work tasks in both domestic and public spheres across cultural contexts. Men and women's social roles are also changing and that has implications for the understanding of perceptions and practices of health. The focus on women in this study does not mean that men do not have an active role in the health of women or that men's health is not as important to understand as women's health. Indeed, a study of men's perceptions of women's health would be a great addition to this study.

#### **1.3.4 Research Partners**

The Yup'ik women with whom I worked, I call research partners. It is a term that I believe includes people in a way that other titles might not. There are many discussions within anthropological circles about what title is appropriate for the people taking part in research

studies: sharing their knowledge and time with researchers. A dominating title has been informant, but that title indicates that Yup'ik women are merely sources of information that I extract what I need from and then leave behind. The women in this study are so much more than that. Several of them have continued to share knowledge and comment on my analytical ideas throughout the research process. They have continued to talk to me and discuss questions and ideas and conclusions for this study. Without them there would be no study. Therefore I choose to refer to them as research partners. Research partners who have helped to develop and define this study, and to make it happen. They have done so on my terms and based on my design and as such it would be wrong to think that this study is based entirely on their ideas and suggestions. I have made the decisions on how this study was framed and developed and by using the term research partners I do not mean that they are also authors. I am sure these young women would have wanted much more influence and control over this study if they were to be identified as the authors of it.

### **1.3.5 Health**

I approach health as a term covering a broad range of cultural ideas and practices. According to anthropologist John Janzen, health can be understood as such things as “the absence of disease, a magnetic and interchangeable relationship consisting of individuals, society and the environment or a philosophical state of mind” (Janzen 2002:4). Notions of health differ among cultures and the ideas of when a person is healthy or unhealthy are culturally defined and constructed. Western ideas of health are grounded in biomedical notions of the state of the physical body and scientific test measures (Janzen 2002:4), while indigenous ideas of health often include a dynamic relationship between body, mind and spirit. Waldram, Herring and Young discuss the health of Canadian aboriginals saying that: “Health is a product of a complex

web of physiological, psychological, spiritual, historical, sociological, cultural, economic and environmental factors” (Waldram et al. 2006:3). As a predominantly social constructivist study, the above definitions of health should only be taken as suggestions of how broad a term health can be interpreted. They are not definitions that I have employed specifically, but they have helped me to open my mind to the many aspects of life that might be connected to health and serve to define health depending on who you are and the cultural context of which you are part.

Researching physical and mental health as well as social and economic aspects of peoples’ lives can be referred to as researching health from holistic perspectives; however, many other aspects might also be included in a holistic model. Using the notion of health can cause confusion, as it will often be narrowly interpreted as physical health, sometimes including mental health. However, I believe health is a more accurate term to use here than, for example, wellness or wellbeing. Wellbeing is a notion that has been widely adopted in economic disciplines and often refers to subjective happiness (Helliwell & Putnam, 2004:1435). To use this term would have opened up a much broader, vague category that is problematic to investigate. Wellness is another term that I could have chosen to use. It can be defined as “giving good care to your physical self, using your mind constructively, expressing your emotions effectively, being creatively involved with those around you, and being concerned about your physical, psychological, and spiritual environments” (Travis & Ryan 2004:1). However in the term wellness lies an assumption of the individual actively pursuing good health. That is not something that I want to assume my research partners do and it is something that was beyond my control in terms of choosing research partners when developing my study. This study approaches the notion of health understood not merely as the presence or absence of disease but including a wide network of social, spiritual, physical, mental, economic, and emotional factors.

### **1.3.6 Traditional/contemporary (dichotomies)**

In most social research a number of dichotomies emerge as salient points of shared culturally recognized contrast. These are used as analytical categories and are often impossible to avoid. One of the main dichotomies that emerges in this study is a traditional/contemporary dichotomy used when analyzing and discussing traditional knowledge and contemporary ideas of health and cultural identity. It is an analytical category that I employ based on how young as well as older Yup'ik women talk about Yup'ik knowledge. As such it is an emic category. This dichotomy does not refer to something essential or a strict division between old and new. Instead traditional refers to a general pool of knowledge that exists. This pool of knowledge is often based on how people used to live before contact with outsiders, but it might also refer to knowledge existing after contact, "after technological improvements had been introduced but before Yup'ik people had experienced subordination to federal and state control and related dependency" (Barker et al. 2010:24). Whether it actually refers to knowledge stemming from these periods or knowledge that is perceived to stem from these periods is subject to discussion. Historian Eric Hobsbawm (1983:1) discusses tradition arguing that sometimes traditions that are thought to go back centuries are in fact recently invented. He defines invented tradition as, "a set of practices, normally governed by overtly or tacitly accepted rules and of a ritual or symbolic nature, which seek to inculcate certain values and norms of behavior by repetition, which automatically implies continuity with the past" (Hobsbawm 1983:1). Yup'ik people are in the process of revitalizing many of their traditions after decades of assimilation to Euro-American society. Therefore the (re)invention of Yup'ik traditions is quite deliberate and the notion of tradition is emphasized and used often as a way to maintain the importance of it. One of the reasons for the invention of new traditions is the inability to use or adapt old traditions (Hobsbawm 1983:5). This is very much

the case for Yup'ik as they went from nomadic to settlement lifestyles with all it has entailed of Euro-American culture. There has been and is a constant renegotiation of what it means to be Yup'ik resulting in inventions of new “old” traditions. The renegotiation of Yup'ik cultural identity will be examined throughout this study in connection to health and referrals will be made to “traditional Yup'ik knowledge” and “a traditional Yup'ik worldview” understood as described here.

I would like to comment briefly on why such dichotomy can be problematic in order to show that I keep this in mind throughout my analysis. The notion of something being either traditional or modern is often made the foundation for studies of indigenous people living in Western parts of the world. They are either living traditional lives or modern lives – lives in which they have assimilated to Western culture. In such works the dichotomy is explained by “traditional attitudes of inertia and resistance must give way to rational, other-directed individual motivation. Only people with these modern attitudes, working in a specialized industrial economy, can alleviate poverty, diseases, malnutrition, and early death” (Kelleher 1992:276). Traditional has mistakenly been thought to be something outdated; something that people cannot use anymore and that should be left behind. This is by no means what I am referring to by using the terms traditional and contemporary. As noted by political scientist Kelleher (1992:289): “The concepts ‘traditional’ and ‘modern’ disregard reality’s contradictory complexity. Traditional is here not meant as something negative. Likewise contemporary knowledge is not necessarily better or “more developed” than traditional knowledge. In reality it is difficult to distinguish between such opposed categories as they are often integrated and used interchangeably. However they are used. Therefore I keep their problematic past in mind and use them as here defined.

## **Chapter 2 Methodology**

In this chapter, I show how my fieldwork has been developed from an idea on paper to execution and final data analysis. I show the methodological framework on which this study is based and provide insights into how I have studied young adult Yup'ik women's health. This is a qualitative study. I am aiming to uncover the perceptions and practices of health of a small sample of urban women. I have approached this through in-depth interviews and participant observation, the practices of which I will discuss below.

In the fall of 2012 informal conversations with a young adult Yup'ik woman in Fairbanks helped to develop the methodological framework for this study and assert a constructive approach to the study of young adult Yup'ik women's health. It has been my intention to create a study that is relevant for young adult Yup'ik women themselves and not a mere filling of a vacuum within an academic research context as described in the introduction. Therefore I started by consulting with a young adult Yup'ik research partner from the beginning of my research process.

It is at this point relevant to comment on who I am to undertake the current study. I already commented on why it is important to look specifically at young adult Yup'ik women's perceptions and practices of health. However from a methodological perspective that group becomes a good choice in a different way as I am myself a young adult woman and I believe that I am able to connect with them as a group because of this. It has proved easier for me to establish relationships with young women of my own age than with, for example, elder Yup'ik men. Likewise it has been my impression that my young research partners have been able to relate to me and confide in me in a way they might not have with other researchers. That being said, I have a very different background than my Yup'ik research partners and I am very much an outsider, looking at Yup'ik understandings of health from a perspective that is very different. I

am Danish; Western, and therefore in a position of dominant power. I am also part of a colonial power as Greenland used to be a Danish colony. It is a colonial power that has had direct influence on Inuit life in Greenland and it could be said that as a result I am part of a colonial power that has had effects on the circumpolar Inuit population of which the Yupiit are part. This part of my background should be understood as something that enables me in terms of being able to do this research but at the same time it does not, nor do I wish it to, represent me. It is an addition to my dominant position of being the researcher asking the questions: demanding answers.

## **2.1 Research settings: the field**

The fieldwork upon which this study is based was conducted in Fairbanks, Alaska. It has been a multi-sited fieldwork experience as I have followed dance practices and performances in multiple locations around Fairbanks. I have also visited research partners in their homes in Fairbanks as well as in cafes, bars, and university settings. Located in an interior valley, Fairbanks is the second largest city in Alaska. Mountains, surrounding the city, are spotted on the horizon, strong winds only blow through this valley on rare occasions, and humidity levels are so low that Fairbanks is considered a desert. Temperatures range from – 50 F in the winter to + 90 F in the summer. Winters are long, cold, and dark as the sun barely emerges above the horizon during December and January. Approximately 100,000 people live in the Fairbanks North Star Borough – a borough measuring 7,338.21 square miles ([quickfacts.census.gov](http://quickfacts.census.gov).) Fairbanks offers many comforts of a big city, such as a variety of restaurants, bars, fast food chains and grocery stores as well as megastores, shopping malls, and beauty salons. The University of Alaska Fairbanks attracts thousands of students during the school year and the Fort Wainwright military base likewise draws thousands of inhabitants to town. Alaska Natives from all over the state come to Fairbanks to pursue education and jobs. Conducting research in

Fairbanks has meant that I predominantly work with Yup'ik research partners who consider both Fairbanks and the Yukon-Kuskokwim Delta their home.

## **2.2 The process of establishing contact**

A snowball sampling method was used to approach a broad spectrum of Yup'ik women mainly in Fairbanks. Snowball sampling meant that I drew upon my social network and the social networks of others to find potential research partners for my study. I sent out emails to other researchers in both Fairbanks and Anchorage. I asked professors and fellow students to pass my request to friends, family members and contacts. I have been in contact with CANHR as well as the Department of Alaska Native Studies and Rural Development at UAF and the Public Health Department at UAA. I circulated Facebook posters and events. I used the Circumpolar Health Conference 2012 to network for contacts. I used emails, phone calls and text messages to contact potential research partners. I approached women in public spaces and at public events. Every partner interviewed was encouraged to find other potential research partners to be contacted. For this particular study that method has meant that all of my Yup'ik research partners are in one way or another associated with University of Alaska. They are students, former students, employees, former employees, or individuals in other ways associated with the University. As such, this study is not representative of a broad group of young, Yup'ik women. It is representative of a smaller, urban group of young, Yup'ik women; women who are college-educated, and who live away from extended families. They are resourceful, independent women.

## **2.3 Interviews**

There are many different ways of conducting interviews. I have chosen to undertake interviews from a life-history inspired approach, meaning that I have tried to learn as much about my research partners' lives as possible while at the same time talking about health. I have



followed my partners for over a year and met with them numerous times. I have talked to them about their lives, their families, how they grew up in villages as well as in Fairbanks, their children, their jobs, their hopes and their plans for the future.

Two aspects of interviewing have been particularly determinant for how interviews have unfolded: settings and format. The settings of an interview have often defined whether it is an informal interview or a formal interview. Meeting a partner in a bar for an initial talk about health and how this study is constructed represents an informal interview that can lead to a long conversation. Coming to a partner's home with an audio recorder does not always invite informal conversation. Instead such situations have turned out to be excellent for formal interviews, where a list of questions are asked and answered, and follow-up questions and additional topics are explored as allowed. Visiting women in their homes has also given me the opportunity to see how they live: to see health in connection to their homes, their families and their surroundings. It has also given them a chance to have an active role in establishing the interview settings – an ability they would not have had in an unfamiliar, office setting. Some interviews were conducted in conference rooms, removing research partners from their personal, familiar surroundings. Those interviews contained far fewer disturbances such as children interrupting or dogs barking. It allowed research partners to focus fully on the questions I asked and the answers they gave. There are benefits and detriments to both interview settings, and the fact that I have employed both have given me access to a variety of information and impressions of my Yup'ik research partners.

My approach to interviewing has been particularly influenced by James Spradley's *The Ethnographic Interview* (1979) and Steiner Kvale's *Interviews: an Introduction to Qualitative Research Interviewing* (1996). Spradley asks that the interviewer try to know what the

interviewee knows, the way that the interviewee knows it (Spradley 1979:24). Heyl describes well how Kvale reminds us that the Latin etymology of the word “conversation” is “wandering together with” (Heyl 2001:371, Kvale 1996:4). Kvale himself describes how the interview is a way to obtain “qualitative descriptions of the life world of the subject with respect to interpretation of their meaning” (Kvale 1996:124). The ethnographic interview is usually conducted over a longer time period, with multiple individual sessions and informal conversations. This allows for mutually respectful and on-going relationships. The ethnographic interview is constructed through a relationship between the understanding of how interviewees reconstruct social experiences through speech and how interviewers make sense of what they are saying (Heyl 2001:370). It is a co-construction of knowledge.

I have been fortunate enough to develop several on-going relationships with my research partners. I have been able to go back and interview them several times; obtaining a relationship with them in which we have been able to explore the meanings they place in different notions and situations connected to health. I have also had shorter, more superficial relationships with research partners who donated their time as best they could and gave me the opportunity to contrast the knowledge stemming from on-going conversations as opposed to one-time interviews. Both relationships are valuable. Through them I have been able to confirm or dismiss patterns and similarities in opinions among them as I based one-time interviews on questions and ideas from on-going conversations that I later went back and challenged with the new information I received from one-time interviews.

Formal interviews were semi-structured, meaning that a list of questions was prepared but not all questions were necessarily asked and there was no specific order in which they were asked. Some research partners required more structured interviews while others completely

disregarded my line of questioning, choosing to tell their stories in their own ways. In such interviews I completely abandoned my questions. I designed questions to be open-ended in order to let research partners talk as freely as possible, without leading them in certain directions, and to let research partners associate questions with social experience in their own way. Before conducting any formal interviews I made sure to meet the women I intended to interview. I bought them a cup of coffee, a beer, or just met up with them and talked to them about the interview and what I was going to ask them. In this way I was not a complete stranger when we sat down for more formal interviews and they were familiar with the topics of the interview.

I have considered how to organize interview questions. The order in which I asked the questions determined what kind of associations I gave research partners. For example asking: “what does it mean to be healthy” before asking: “who taught you about health” was intended to foster a more abstract answer to the first question. On the other hand if I ask: “who taught you about health” first, the partner will have a frame of reference that she might not think in terms of if asked the other way around. I experienced both. One important strategy has been to sometimes let silences stand. To not fill every pause with a new question or comment but instead remember to give time and listen, even when nothing is being said out loud.

## **2.4 Participant observation**

Margaret Mead once said:

A rather disproportionate amount of my knowledge about Samoan custom and style came through my exposing myself – to teaching – both in a manner of etiquette, dancing, recitation of fa’alupenga – the stylized courtesy phrases and the making of artifacts (...) I felt it was necessary to actually labor through the specific tasks (...) which a Samoan girl had to perform (Mead 1930:xix).

Although Bronislaw Malinowski has been said to be the founder of anthropological fieldwork and participant observation (P.O.), many others used P.O. both before and after Malinowski. Margaret Mead, quoted above, was one, who also marked a shift from her mentor Franz Boas and his students' methods of gathering historical material to preserve information about disappearing cultures (Dewalt and Dewalt 2011:8). Mead's use of P.O. differed from Malinowski's as she used it to explore one specific aspect of Samoan culture and not the culture as a whole, including all aspects of customs, traditions, symbols, language, artifacts etc. I follow Mead's approach and use P.O. to investigate a specific aspect of Yup'ik culture: dancing as a practice of health.

To focus on one aspect of a culture does not mean to ignore other aspects. Rather, P.O. allows the researcher to understand the connections between different aspects of that culture. By participating in and observing Yup'ik dancing I have been able to develop an understanding of how dancing is connected to health; how dancing is healthy; how dancing *is* health. I followed dance practices in the Inu-Yupiaq dance group through three months in the fall of 2013. I remained very much an outsider during my time with the Inu-Yupiaq dance group as I struggled to find my role in the group. Was I an aspiring dancer? Was I audience? Was I an anthropologist doing fieldwork? The last one might be obvious but I initially joined the dance group to learn more about Yup'ik culture and not specifically to make it part of my fieldwork on perceptions and practices of health. I was not sure what my goal with dancing was at first and therefore I also struggled to find my role there. Later when I began to realize how dancing can be understood as a practice of health and a metaphor for the notion of health I became more sure of what my role as an anthropologist should be. However time did not allow for me to develop that role as much

as I would have liked. Dancing as a practice of health can be explored much more than I was able to do here and this study should be understood as an initial examination of Yup'ik dancing as a practice of health.

P.O. is a form of data collection but it is also an analytical tool. It is a way to gather information through being there while at the same time enabling the researcher to interpret what goes on in new ways (Dewalt and Dewalt 2011:10-11). New research questions may emerge and prior assumptions are challenged as participation and observation continue. I have taken extensive notes during and following P.O. in all locations. These are used in the foundation of the analysis next to interview data. One thing I struggled with in connection to this data analysis was how to interpret songs and interactions that were all in Yugtun. I do not speak the Yugtun language and therefore there was much that I did not understand during dance practices. At performances it has been somewhat clearer because these are aimed at diverse audiences who often do not speak Yugtun, but dance practices were primarily in Yugtun and as such there is much information I have missed.

## **2.5 Ethical considerations**

I followed ethical guidelines for research with human subjects as taught to me by my advisor Patrick Plattet. I have read the Belmont Report and completed the basic course of CITI training required by the IRB at UAF. I have obtained the permission of the IRB at UAF for doing my fieldwork. The consent form and questions used for interviewing were likewise approved by the IRB at UAF.

Ethics should be considered throughout the whole process of conducting research from the initial idea, to sources of funding, to doing fieldwork, to analyzing the data (Fluehr-Lobban 1998:181). I am dealing with a potentially sensitive, personal subject regarding young,

indigenous women. Research partners might share personal stories of mental and physical illnesses, family issues, and abuse or neglect. Although I am using the information to understand what it means to be healthy, others might be able to use it to show how Yup'ik women are unhealthy. Consequently I have chosen to provide anonymity to all research partners in the study. In fact regardless of whether everyone requested anonymity I have a responsibility to treat the sensitive information I have collected in a respectful way, and I have found that to be easiest by establishing a certain level of anonymity. Indigenous scholar Bagele Chilisa argues that making research participants anonymous regardless of whether they explicitly wish to remain so, is a tendency in Western psycho-sociological research methods. It does not always comply with indigenous people's wishes, because they might feel they are made invisible. Their voices are generalized and it is not clear where specific stories are coming from (Chilisa 2012:207). I have considered Chilisa's argument, however I have to comply with the current IRB guidelines at UAF and keep information confidential. None of my research partners have explicitly asked to be recognized by name.

Another ethical consideration involves how sensitive information ought to be handled and how to be ready to offer appropriate contact information for counselors, medical doctors etc., if requested. I, as the interviewer, am not providing counseling or advice to research partners' issues or dilemmas. I am interviewing Yup'ik women to gain an understanding of what they think about health and how they act to stay healthy. The focus is on health, not on illness, which does not mean that research partners cannot talk about illness, but it means that I have not persisted on digging into their personal histories of illnesses, neglect and abuse. I have been there to listen and understand, not to judge. Instead I have brought information on where to go and whom to

contact if someone needed counseling or medical attention. As it turns out, my research partners have been far more knowledgeable about health services and offerings in Fairbanks than I am.

Finally, my fieldwork in the Inu-Yupiaq dance group sprung from my initial desire to simply learn more about Yup'ik culture as described above. Therefore it was not clear to me nor the dance group who I was and what I was doing there at first. Once I realized I would like to use observations from their practices I informed the leader of the dance group, who had also initially invited me, as well as anyone whom I talked to about my study, about my intentions. It is a dance group that is open to the public and as such the level of disclosure has been my responsibility that I hope I have treated in a respectful manner. In an in-depth study of the dance group specific permission from all dancers should be obtained but since this was but an initial examination I did not take such extensive steps.

## **2.6 My Yup'ik research partners**

This study is primarily based on four higher educated, independent Yup'ik women's perceptions and practices of health. They all have very strong, positive ideas of how to be healthy, while at the same time have suffered through some of the traumas that Yup'ik people continue to deal with. All four young women are in transitional stages of their lives meaning that within the year I followed them they went through major life changes and they continue to do so. Therefore the following descriptions should be understood as glimpses of their lives at a certain moment in time, which might already have changed significantly. Nevertheless their ideas of health have remained the same throughout our conversations.

One Cup'ik and two Yup'ik elders have been consulted to provide additional and alternative perspectives on young adult Yup'ik women's health as well as dancing. Below I introduce these research partners along with the Inu-Yupiaq dance group as a whole.

### **2.6.1 Hannah**

Hannah is 32 years old. Hannah's mother is Yup'ik and her father is of Austrian, German and Irish descent. She has two younger sisters. Hannah lives in Fairbanks with her five-year old son. She lived in a Yup'ik village until she was three, then she moved to a small town in Interior Alaska. She spent 5<sup>th</sup> grade and one year of high school back in two different Yup'ik villages. Hannah does not speak Yugtun and struggles to recall the few sentences and words that her mother taught her as a child. Her mom speaks fluent Yup'ik. Hannah tries to teach her son the few Yup'ik sentences she knows. At the time of our first interview Hannah is a trade apprentice. She is the first single mother ever to be an apprentice with her union. Currently Hannah has been forced to drop her apprenticeship because of a physical injury. She is now trying to figure out what she wants to do instead and is going through an identity crisis as a result. Hannah and her son live in a small, dry, log cabin. The cabin is light and cozy with lots of plants and decorative items. The loft is dedicated to Hannah's son who has a wonderland of toys, videos, and dress-up clothes. Hannah explains that most of it comes from the transfer site. Hannah lists her close girlfriend as the healthiest person she knows.

### **2.6.2 Julia**

Julia is 30 years old. Her father and mother are both Yup'ik and they are still together. She has three brothers and two sisters – Julia being the middle child. She grew up in a coastal village in Alaska. She was a stay-at-home mom for a while, but now she is working fulltime. She loves babies and sometimes helps take care of other's babies. Julia speaks fluent Yugtun and has previously worked as a translator. She tries to teach her children Yugtun as much as she can. When she was 25, Julia was diagnosed with hyperthyroidism, which is when the thyroid is overactive resulting in various conditions of weight-loss, fatigue, increased appetite, problems



concentrating, nervousness etc. Julia is also one of the original members of the Inu-Yupiaq dance group, although she does not dance with them or any other group. Julia lives in a two-story house in a kids-friendly neighborhood with her family. There are toys scattered all over the snow-covered front yard and inside in the living room. It is clear that children live in Julia's house. The kitchen is big and open with strong sunlight coming in through the windows and kambucha bottles stacking up on the counter. Julia lists herself as the healthiest person she knows.

### **2.6.3 Sarah**

Sarah is 31 years old. Her mother is Yup'ik and Athabascan and her father is Euro-American. Her parents divorced when she was 14. She has a younger half-sister. Sarah is married and has no children. She grew up in Fairbanks. Her mother moved back to the Yukon-Kuskokwim Delta when she was a teenager and Sarah went there every summer until she started college. She works for the State of Alaska and, at our first interview, had just been accepted into a master's degree program that she is planning to pursue while working full time. Currently she has finished the first year of her master's degree. Sarah's mother used to speak Yugtun but cannot remember much anymore. Sarah does not speak Yugtun. Sarah's house is located a good drive out of town on top of a hill. She has two dogs that contributed generously to the audio recording of our formal interview. Her house is two-story with the bedroom and workout station downstairs and a big open kitchen and living room area with large windows to the east. She apologizes for the mess. I see no mess. Sarah lists her co-worker as the healthiest person she knows.

### **2.6.4 Bonita**

Bonita is 28 years old. Her mother and father are Yup'ik and remained together until fall 2013 when her father passed away. She has one sister. Bonita grew up in a village on the Yukon-Kuskokwim Delta and moved to Fairbanks for college. She was always her father's daughter and

learned many “little boys’ skills” growing up because of it. She is currently single and does not have children. Because of a recent break-up she has moved in with her cousin here in Fairbanks, which provides stability and safety that she appreciates right now. She is a student at UAF. Besides her studies she works part time at the University where she has finally (her word) realized that she wants to work to promote Yup’ik culture and enhance health in Yup’ik communities. Her primary activity outside school and work is dancing with the Inu-Yupiaq dance group. Bonita lists her mom as the healthiest person she knows.

#### **2.6.5 Ruth**

Ruth is a Cup’ik elder. She was born in a village by the Bering Sea. As a child in the 1950s and 1960s she travelled around according to seasons between spring camp, fish camp, berry camp, fall camp and the village. She went to a Catholic boarding school and later joined a Catholic organization that enabled her to travel around the world and help people. She has a master’s degree and has worked as a teacher and religious educator among other things. Ruth carries the authority of an elder with her and she is quick to correct me and question my knowledge when she suspects there is something that I do not understand or something of which I should be made aware.

#### **2.6.6 William**

William is a Yup’ik/Inupiat elder. He is 62 years old. He grew up in a village southeast of Nome. He left the village at 18 when he joined the military and has lived all over the United States as part of his military training. He has four sisters and three brothers. He has three children, the youngest one is still living with him and his girlfriend. He has been in the food service industry for 45 years and is currently enrolled in school to become a chef. William speaks both

Yugtun and Inupiat but he does not like to speak his native languages when he is around non-native speakers. William lists himself as the healthiest person he knows.

### **2.6.7 Theresa Arevgaq John**

Theresa John<sup>2</sup> is a Yup'ik dancer, a Yup'ik leader, and associate professor in the Alaska Native Studies Department at UAF. Theresa John wrote her dissertation on Yup'ik dancing as well as contributed to Barker et al.'s Yup'ik ways of dancing (2010). In spring 2014 I took the class Native Ways of Healing with Theresa John. She shared her immense knowledge of Yup'ik dancing with me and through discussions of what dancing means to the Yupiit, very constructively commented on my ideas and findings in connection to this study.

### **2.6.8 Inu-Yupiaq dance group**

The Inu-Yupiaq dance group is officially a UAF student organization. They practice Yup'ik and Inupiaq dancing two to three times a week at the UAF campus. The group consists mainly of young Yup'ik and Inupiat college students and alumni. It is a public club that anyone is invited to join. Currently there is one non-native dancer in the group. At the time that I participated in their dance practices they primarily sang Yup'ik songs and most of the dancers were Yup'ik. Therefore when I refer to them throughout the analysis I refer to them as Yup'ik. However it should be emphasized that this was only at this particular short amount of time – at other times Inupiat dances and songs are just as prevalent in the dance group.

## **2.7 Perceptions and practices**

Perceptions are often worded in terms of the ideal. They are people's ideas of what is the healthiest; how one should live, act, think to be the most possible healthy. If I only examined

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<sup>2</sup> Theresa John has not been made anonymous in this study as she has a different association as a professor and teacher to me.

perceptions of health; if I only asked questions such as “what does it mean to be healthy” I would only get answers of what ideally is the most healthy a person can be, live, and act. Practices on the other hand call for more personal examples and experiences of health. By asking partners what they do to stay healthy: what practices of theirs they connect to health, I get them to talk about how they stay healthy, and not just how one ought to stay healthy in a hypothetical sense.

Sometimes, however, people do not reflect upon how they *actually* stay healthy or *why* they stay healthy the way they do. They are simply unaware of why they think and act in certain ways. To understand this aspect of perceptions and practices both methodologically and analytically I employ a theoretical framework based on Bourdieu’s theory of practice. Pierre Bourdieu developed and popularized a practice theory with the notion of habitus as a central concept in the late 1970s. The notion of habitus as Bourdieu describes it, is important to explore in depth because it is from the habitus that practices and perceptions originate. If habitus is accepted as a basic principle of the organization of human action, then it is possible, with a Bourdieusian perspective, to analyze why people think the way they do and act the way they act to a certain point. In Chapter 3 below I will explain the Bourdieusian concepts of habitus, doxa and orthodoxy, as I apply them to my analysis, but here it is merely important to note that Bourdieu’s theory will provide a theoretical framework for explaining aspects of my research partners’ perceptions and practices of health that are not explained by the women themselves or easily observed by me, the researcher <sup>3</sup>.

All of the Yup’ik women I have talked to in connection to this study, be it in formal interviews or informal conversations, started out informing me that they are by no means role models for health. Everyone is convinced that there must be others who are more appropriate for

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<sup>3</sup> Additionally I do sometimes use the word strategies, which should be understood as referring to perceptions and practices as a whole.

a study on how to stay healthy – someone who is healthier and who have better advice to give. Even Julia and William, who list themselves as the healthiest persons they know, express doubt about having the knowledge that my study needs. This might be because this is a study that is centered on their personal experience and knowledge, which might seem too average, too simple to them but is true gold for an anthropologist like me.

## **2.8 Data analysis**

The data collected through interviews, observations and participation amounted to a substantial collection of field notes, interview notes, transcriptions and various fliers, pamphlets and newspaper clippings. I used Microsoft Excel to sort all this data into categories I developed as I went through the material.

I have divided my analysis into two parts. The first will focus on perceptions of health, analyzing how research partners understand the notion of health itself and how one stays healthy in theory. This analysis is primarily based on data from formal interviews. As it turns out, in interviews, there is not always a clear distinction between accounts of perceptions and accounts of practices. These weave together in research partners' answers to my questions. For example, a question like "what does it mean to be healthy" might be answered with an abstract explanation of being balanced or a practical example of exercising. Therefore the first part of the analysis also includes examples of practices. Perceptions of health are grounded in research partners' own habits and understandings; in many ways perceptions are grounded in practices, just as practices are grounded in perceptions. Therefore the two also turned out to be mixed in interview material and it would be misleading to not show how they are intertwined.

The second part of the analysis focuses on one particular practice: dancing. This prevents repetitiveness from part I, as I do not focus on practices in general, which I have already covered

to some extent, but instead narrow the scope to dancing as a practice of health. Throughout the analysis I continue to comment on the development of a notion of health as it takes shape.

## **2.9 Health in the Arctic: major topics and where this study fits in**

This section provides an overview of major health topics and trends in the Arctic. As such, it functions as an examination of the state of health in the Arctic, what it means to study health in the Arctic, and how research is generally approached there. Understanding this context will result in a greater understanding of the topics that I deal with in my analysis, as well as a greater understanding of the notion of health itself. Through examples it will be shown how the notion of health is primarily being defined as biomedical in research and why such a definition may be problematic at times. Ethnographic literature on Inuit women will be explored as a way to move beyond the hegemony of biomedical research and to show health issues that Inuit women specifically deal with – issues I do not dwell upon specifically in my analysis, but that are nonetheless relevant to understand when strategies for staying healthy are explored.

Some researchers argue that the Arctic is a unique place when looking at health. Especially the “rapid social changes where local and global cultures as well as old traditions and new technologies are mixed in a myriad of ways” (Hild & Stordahl 2004:155), is thought to differentiate the Arctic from other parts of the world. Rapid cultural change has occurred in other parts of the world. Hild et al.’s argument might be a bit too strong; nevertheless, what is relevant to note is that there is a unique cultural context in the Arctic. People might be living without access to running water, while using snowmobiles or newest-model trucks to navigate around villages and towns. They might go seal or moose hunting in the early morning and check their emails during the evening. They have smart phones and mukluks. Alaska Native ways of life are mixed with Alaskan (Western) ways of life together shaping what it means to be an Alaska Native

today. There are still considerable health disparities between Alaska Native and Euro-American populations in the Arctic (Bjerregaard et al. 2004:391). Life expectancy for Alaska Natives is lower than for Euro-Americans, standing at 68.1 years for Alaska Native men and 75.4 years for Alaska Native women, compared to 74.5 for all Alaskan men and 80.1 for all Alaskan women (Young 2008:71). Infant mortality rates for Alaska Natives is 11.4 % while the rate for Euro-Americans is only 4 % (Parnell et al. 2009:22).

Major health issues include chronic diseases, such as cancer, diabetes, heart diseases and obesity. Intentional and unintentional injuries are other major health issues and these include accidents related to alcohol, drugs and suicides (Bjerregaard et al. 2004:392-394). Articles exploring physical health issues, such as cancer, obesity, heart diseases, physical effects of smoking etc., are many (e.g. Angstman et al. 2007, Avntorp et al. 2013, Bjerregaard & Young 1998, Bjerregaard et al. 2004, Jolly et al. 2011, Kemberling et al. 2011, Chateau-Degat et al. 2011, Smith 2007, Plante et al. 2011, Young et al. 2007). Mental health issues, such as internalized processes of acculturation, suicide, alcohol abuse etc., are also examined in numerous research volumes (e.g. Bals et al. 2011, Boyer et al. 1989, Chance 1965, Chandler & Lalonde 1998, Chandler et al. 2003, Mclean 1997, Manson 1997, Walls et al 2007, Tester & McNicoll 2004, Wood 2011). These articles on health in the Arctic are biomedical in their scope.

Biomedical can briefly be defined as something that has to do with both biology and medicine. It is natural sciences and clinical medicine coming together. Two examples are given here to illustrate the biomedical approach to health as well as to touch upon topics relevant to the study of young adult Yup'ik women's health. Angstman et al. (2007) examined tobacco use among Alaska Natives on the Yukon-Kuskokwim Delta (Y-K Delta). Their study is based on data from the Well Child Assessment, a program that aims at screening for and identifying

medical, psychological and behavioral health problems among Alaska Native children and adolescents (Ibid:251). These researchers note that over 50% of women on the Y-K Delta use tobacco while they are pregnant (Ibid:249). Often tobacco is not smoked but chewed as smokeless tobacco (ST) using either store-bought brands or the homemade ST iqmik. Iqmik is made from mixing fire-cured tobacco leaves with ash from a burned wood fungus (Ibid:250). Iqmik contains almost 100% freebase nicotine. Some 4.2% of 1-6 year-olds use ST on the Y-K Delta and an increase in use is found with age such that 63.0% of 15-18 year olds use some form of tobacco while only 9.1% report using alcohol (Ibid:256). Moreover it is females who report the highest rates of using tobacco. Angstman et al.'s Figure 1, panel F shows that approximately 100% of 18-year old females report current tobacco use.

This article is an example of a biomedical approach to health where observations are based on statistical data regarding a physical aspect of health: tobacco use and its impacts on the human body. The article brings attention to rates of tobacco use among children and adolescents: particularly females. As such the article is an important piece of research for it brings attention to a health problem that should be addressed immediately while it is also maintaining a notion of health strictly defined as biomedical focusing on the physical effects of a practice.

Another example of a biomedical approach is Young et al.'s (2007) article on obesity in the Arctic. The rates of obesity in Inuit populations across the Arctic are explored through a comparison of data from four surveys all using BMI (Body Mass Index) and waist circumference to decide whether individuals are obese or not. The study finds that 36.6 % of Inuit women and 32.5 % of Inuit men are overweight (Young et al. 2007:691). A discussion of the physical consequences of obesity follows, listing various cardiovascular risks, HDL, cholesterol, and triglycerides (Ibid:694). When compared to a non-indigenous population in Canada, BMI and



waist circumference were found to be potentially inadequate measures of obesity as the levels of metabolic risks connected to obesity are very different between the two populations. For example, Inuit populations' traditional diets contain high levels of omega 3 fatty acids, which could be serving as a modifier between obesity and risks: Inuit might be clinically considered overweight but still relatively healthy (Ibid:694). What this study and the previous study show is that biomedical approaches to health are important locators of health issues. They are crucial in the process of defining health problems and providing data. However such articles rarely move beyond identification and confirmation of issues.

The analysis of causes and how to move beyond health issues often require a different approach and a broader perspective on health than physical facts. While these biomedical studies give insight into physical aspects of health, they do not provide a basis for solving issues of smoking or being overweight, nor do they provide insight into local understandings of smoking. A biomedical approach to health is limiting because it only looks at health from one perspective out of many. A consideration of what the notion of health entails is necessary in order to develop solutions for health issues and strategies for staying healthy. This is where the current study comes in. It looks at how a group of people understands the notion of health itself and how their strategies for staying healthy are connected to that notion. In order to take any kind of effective health measures a clear understanding of the notion of health is necessary; an understanding that states what the concept is, how it is generated, and what it is not in a specific context (Ustun & Jacob 2005:802).

Despite an overriding biomedical approach in research on health, other approaches exist. Hild & Stordahl. write: "When health is defined as the mental, physical and social well-being, and not merely the absence of disease and infirmity, cultural and social practices become critical

contributing factors” (2004:155). Hild & Stordahl here show how the term health ought to be conceptualized broadly and approached from a variety of angles. An example of a different approach can be found in anthropologist Lisa Wexler’s work. Wexler challenges the biomedical hegemony in health research in her articles on Inuit youths’ high suicide rates in Alaska (Wexler 2006, 2009). She argues that by looking to colonialism for causes of suicides, health is repositioned as a social, cultural, and political issue instead of a physical/mental issue (Wexler 2009:1). Likewise in a review of Inuit women’s health in Canada, Healey and Meadows conclude that although challenges to Inuit women’s health are extensive, broad literature in the field is almost non-existent (2007:211). They found less than 50 articles relevant to Inuit women’s health across the circumpolar north. Most of these dealt with women’s physical health and issues of reproduction leading back to the biomedical discussion above. While this might seem like a fairly large number of articles, I found far fewer articles in my own literature review that specifically targeted research on Inuit women’s health. Such findings suggest that Healey and Meadows’ criteria for what is relevant for Inuit women’s health are quite broad in scope.

Healey and Meadows discuss the biomedical hegemony in research on health and try to move beyond it in their list of health topics. They discuss seven health topics as particularly relevant and problematic to Inuit women: 1. Sexual health, pregnancy, childbirth (traditional vs. contemporary) and adoption; 2. Alcohol and drug abuse; 3. Tobacco use, smoking and environmental tobacco smoke (ETS); 4. Contaminants, diet and nutrition; 5. Mental health, wellness, suicide and stress; 6. Violence and trauma; and 7. Risk factors for cardiovascular diseases and diabetes (Healey & Meadows 2007). These health topics, while still dealing very much with physical aspects such as reproductive health, diet and disease, nevertheless have social, cultural economic and political aspects in their phrasing, which broadens the scope of the

topics and potential analyses. “Economic circumstances, lifestyle, exposure to severe cold and contaminants, dietary changes and geographic and political isolation pose many challenges to achieving good health” (Ibid:200). The article also emphasizes that Inuit women are central to the care of future generations and therefore their health is an important factor in a broader community health perspective.

So far there are two approaches in health research: a biomedical approach, or a broader approach that incorporates social, cultural, economic, and political aspects; one might even dare call it a holistic approach to studying health. Nevertheless, these two approaches should not be seen as oppositional choices of either approaching health from a biomedical or a holistic perspective. Instead they might very well be combined. I believe another perspective on how to approach the study of health that combines the biomedical and the broader, holistic approaches might be found in ethnographic literature that does not focus specifically on health but on Arctic women’s lives in general. Anthropologist Marcia Inhorn argues: “A specifically ethnographic approach to women’s health leads to a particular set of insights that are important, timely, and quite different from the women’s health research agenda currently being promoted within biomedical and public health circles” (Inhorn 2006:346).

Of particular importance to this third approach to studying health is ethnographic literature that uses life history methods. Margaret Blackman’s book (1989) about Sadie Brower Neakok and Nancy Wachowich’s book (1999) on three generations of women in an Inuit family are two examples of the ethnographic life history approach. Sadie Brower Neakok’s life history is recollected through interviews performed by Blackman and her students. Born in 1916, Sadie Neakok represents the grandparental or even the great grandparental generation of young adult women today. Sadie Brower’s recollections of her life provide unique insights into the life of a

strong, resourceful Inupiaq woman who worked as a public welfare employee, was the first female magistrate in Barrow, a mother and a grandmother, and also personally acquainted with disease and illness in a remote, rural community. Neakok describes how she returns home to Barrow after years of being away at high school outside. She cannot remember her native language well. She dresses like a white woman. She can see how unsanitary the village life is. Her friends call her a white woman and look up to her because of it. She has changed after living in a Western world. She struggled to fit in, in the Western world outside, and now she struggles to fit in the Inupiaq world at home. She is stuck in a dilemma where her cultural outlook is a mix of both Western and Inupiaq culture, and she does not really fit into either of those cultures (Blackman 1989:96-110). Here is an example that indicates something about several aspects of health. There is an obvious aspect of sanitation, as the village lacks plumbing and running water. There is a cultural identity aspect as Sadie struggles to figure out her cultural identity in a world with both Western and Inupiaq influence. Lastly there is a community aspect as Sadie experiences being disconnected and excluded from her own community because she left it for a while.

Wachowich tells the stories of a grandmother, daughter and granddaughter from a Canadian Inuit village. Granddaughter Sandra Katsak was born in 1973 and describes more recent experiences of being a young adult in a remote community, while her mother, born in 1957, provides insights into the experiences of a parental generation's life experiences including health. Wachowich introduces Sandra's life history writing: "Her stories reflect upon hunting, smoking, drugs, health, religion, her relationships with her grandparents, her trips to the land, and her trips south" (Wachowich 1999:211). Here again a wide range of topics is touched upon all contributing to an overall understanding of what health is.

The life-history approach to health is a constructive way to examine this notion as the ethnographic examples above show. What is to be taken from this is that there are many ways to look at health and one needs to keep an open mind as to what the notion might mean in a specific situation or context. It can refer to a broad range of factors or just one single measurement. It is not only about naming all the factors and things that health might include or refer to. It is also about understanding the notion's limitations in a specific cultural context or approach. In the current study the notion of health is examined with the above approaches in mind.

One last consideration ought to be made with regard to perceptions of health. Kirmayer et al. (1994) examined Canadian Inuit concepts of mental health and illness through ethnographic interviews. Inuit describe mental as well as physical illness as connected to a lack of eating traditional foods (Kirmayer et al. 1994:60). They describe the natural environment as improving their mental health (Ibid:61), and substance use and emotional trauma from abuse as detrimental to their mental health (Ibid:62, 65). Kirmayer et al. find that spirit possession is also given as an explanation for why people are mentally ill. This idea of spirit possession is traced back to a popular 'born again' Pentecostal movement in Nunavut as well as older Inuit shamanic traditions (Ibid:67-68). Bronwyn Fredericks (2003), herself an Australian aboriginal, examines aboriginals' perceptions and experiences of health from an emic perspective. She does not use the term balance as a theme but the notion shows up repeatedly in her text in the context of reciprocity. It is explained how, "if you take something from someone, then you have to give something back: this keeps life in balance" (Fredericks 2003:59). Furthermore she refers to how aboriginals balance their use of the environment (Ibid:130), how she struggles to maintain her cultural balance as she works in Western academic settings (Ibid:102), and how gender roles and relationships are at the foundation of community balance (Ibid:124). Quoting Philips, she writes:

Support must be given in the revival of culture and spirituality for well-being and health, for the development of emotional, mental, physical and spiritual healing tools and strategies that allow people to address and resolve their personal traumas (to be able to live a balanced life in the future) (Ibid:370).

Fredericks shows how cultural and spiritual factors affect health and might actually be defining for the development of health issues as well as health solutions with regard to physical and mental health. As such they are crucial to consider when examining physical and mental health. Karen Wiscoft has investigated the Greenlandic notion of health through a comparative analysis between Greenlandic and Danish notions of health in the world of social workers. She argues that for Greenlanders, health is something positive and life confirming while illness is something less controllable, but inevitable (Wiscoft 2010:102). Health is the ability to know how much one can take on and take in (Ibid). It is a notion that is considered normative and associated with values (Ibid:103). The Greenlandic word for health is *peqqinneq*, which means something or someone is in the right place (Ibid). It means that the soul, feelings, mind and body are in the right place. It is to give the soul energy, the body strength and the identity strength (Ibid:104). Lastly Wolsko et al. (2006) have previously examined conceptions of wellness among the Yupiit. They find that traditional values are very much at the center of Yup'ik perceptions of wellness including sharing, reciprocity and connections to the land (Wolsko et al. 2006:353). They write:

The central Yup'ik values of reciprocity, respect, sharing and maintaining harmony within the extended family, community and natural environment stand in stark contrast to the values of competitive individualism and dominance over nature which have driven mainstream US society and prevailing psychological theories of what it means to be well (Ibid:360).

This quote describes the Yup'ik values that are believed to be at the foundation of health and wellness. This study was conducted in rural villages in Alaska and the findings are based on how rural Yup'ik live their lives. Furthermore, the quote illustrates the sometimes contrasting relationship between Yup'ik and Alaskan (Western) culture that Yupiit have to navigate in their daily lives.

The above studies on health are diverse. They range from being entirely focused on biomedical aspects of health, such as obesity and BMI, to discussing colonialism as a cause of suicide, to broad life-history ethnographic approaches. There are many notions of health “up in the air”. Do they all eventually merge into the same notion? No. They exist beside each other: referring to slightly different things that are related in undefined and undiscovered ways. In order to understand these studies one has to base them on specific notions of health, which is what my analysis attempts to do in a Yup'ik context.

## **2.10 Yup'ik people: culture, health and change**

This section provides a contextual framework for studying health among the Yupiit. It does not focus on the notion of health so much as the historical and cultural context that this study is part of and that has helped to shape a Yup'ik notion of health over time. My study takes place in Fairbanks. Later I will describe what that means in terms of field settings and context for this specific study. However in a cultural contextual perspective, West/Southwest Alaska and particularly the Y-K Delta, is the home of the Yupiit. It is from here that the Yup'ik culture has developed.

For centuries the Yupiit lived on the Yukon-Kuskokwim Delta. They are part of the large group of Inuit peoples that inhabits the Arctic across Greenland, Canada, Russia and Alaska. They belong to the Yup'ik-speaking part of the Inuit population. “Yuk” means person and “pik”

can be translated as real or genuine: Yup'ik meaning a real/genuine person (Fienup-Riordan 1990:5). The Y-K Delta is a rich and bountiful environment with access to both large rivers and seacoast. The rivers have a variety of salmon, herring, whitefish, trout and more, while the coast provides access to a variety of smaller animals; seals, beluga whales, walrus and more. Birds migrate to the delta in the spring to nest, providing another source of meat and inland moose and caribou are just as important for survival as fish and sea mammals (Ibid:8-9). The weather is warmer than in North Alaska and a variety of plants and berries can be found throughout the region. Before contact with the Western world, Fienup-Riordan writes of the Y-K Delta: "Environment set the stage for cultural florescence and so the rich southeast Alaska environment nourished the largest Inuit population in the world" (Ibid:8-9). People did not have to move around as much as the Inupiat of north Alaska, because of the abundance of the land. Instead they formed larger social groups and stayed for relatively long periods in the same places. There were between 7-12 territorially and socially distinct groups in the region in the early 1800s. The actual number differs between different historical sources (Ibid:9; Vanstone 1984:224).

The cultural and geographical distinctions between these groups have become less clear after contact with outsiders, who caused migration and change among the different groups. The reasons for migration and change were epidemics that resulted from the introduction of new diseases, the establishment of schools and the increasing number of missionaries in the area. The manifestation of Western culture, Western infrastructure, products such as alcohol, tobacco, and sugar, and new diseases have changed and challenged Yup'ik modes of living and the health issues that they face. The Yupiit have, as all people, been acquainted with health challenges since the beginning of their existence (Burch 2006:277). However these challenges have previously and predominantly been connected to survival on the land, be it physical injuries, diseases, or



infections (Waldram et al. 2006:47). In more recent times, health challenges include such things as discontinuities between past and present, alcohol/drug abuse, smoking, culture loss, political interventions, and lifestyle diseases such as obesity, diabetes, and stress. Fur-trading and commercial fishing companies also contributed to people moving around and changing their livelihoods (Vanstone 1984:224). Within each group were a number of villages ranging from 50-250 persons. Connections between the villages were maintained through blood and marriage (Fienup-Riordan 1990:9). Connections between the different cultural groups in Alaska were maintained through exchange and warfare. Around 1900 extended bilateral families made up the basic social units in the region. These extended families could make up whole communities when people of real and fictive, consanguineal and affinal ties lived together (Ibid:10). Larger groups split up during the summer to go to fish camps while in the winter they coalesced in a larger winter camps. Here men and boys over the age of five lived in communal men's houses called *Qasgiq* while women lived in numerous sod houses called *Enet*. Women took care of children, prepared and cooked food and sewed (Ibid:10). Lack of Western research and general Western contact in the Y-K Delta in the 19<sup>th</sup> century resulted in greater continuity between the past and the present for the Yup'ik. Today they are considered to have one of the strongest cultural platforms in Alaska because they were able to continue their ways of life in largely undisrupted ways compared to other indigenous peoples of Alaska (Johnson 1997:135).

Due to the fact that the Yupiit had been isolated from most contact with early explorers and traders, missionaries were some of the first to create change in the area. Christianity was introduced in the 19<sup>th</sup> century in Western Alaska. In the 1840s Russian Orthodox came to the region followed by Moravians and Jesuits in the 1880s. Half-Aleut, half-Russian missionary Iakov Netsvetov established the first Russian Orthodox Church on the Y-K delta in 1845 (Litecky

2011:74). The Russians were very tolerant of Yup'ik practices and hoped that through that tolerance, the Yupiit would eventually embrace the Orthodox religion (Ibid:75). "Both Moravians and Catholics were less tolerant of pre-Christian ritual acts, especially the masked ceremonies, than their Russian Orthodox predecessors, referring to them alternately as 'heathen idol worship' and the 'devil's frolic' " (Fienup-Riordan 2005:xix). Missionaries banned traditional dancing across the Y-K Delta, but the knowledge of dances, songs and stories was preserved until the ban was lifted 30-50 years later (John 2010:157). From 1885 through 1900 Moravians John and Edith Kilbuck served as two of the most influential missionaries in the region mainly because they combined Yup'ik teachings with Christian messages (Fienup-Riordan 1990:71). Before the missionaries infiltrated Yupiit communities, shamans were the spiritual leaders as well as healers among the Yupiit. They "played a major role in community health, cultural, and social survival" (John 2010:171). However that changed as missionaries undermined shamans' authority, especially in connection to disease epidemics that they were not able to cure while the missionaries could (Litecky 2011:44). As such, Christianity challenged Yup'ik spirituality and through that their notion of health.

In 1900 a major influenza epidemic ravaged Alaska's native populations. Villages lost 25 – 50% of their inhabitants and nearly a quarter of the Yupiit population died (Wolfe 1982:91). The 1900 epidemic is referred to as the Great Sickness. Epidemic diseases such as measles and influenza were introduced to the Yupiit by Euro-Americans. Acute infectious diseases were unknown before contact with the outside world (Ibid). While influenza had occurred before 1900 the particular strain of that year must have been new as so many Alaska Natives were unable to resist it. The short and intense gold rush that followed a discovery of gold in Nome in 1898 might have been the reason for the introduction of this new strain of influenza as thousands of Euro-

American gold seekers came to the area (Wolfe 1982:95). One account from missionaries at Holy Cross reads:

You enter a tent and you see a man and his wife and three or four children and some infants lying on a mat, all half naked, coughing up bile with blood, moaning, vomiting, passing blood with stools and urine, with purulent eruptions from the eyes and nose, covered with oily and dirty rags, all helpless, and wet and damp day and night (Parodi 1990 in Wolfe 1982:95).

Other accounts indicate that it was not singularly the influenza epidemic that killed so many people. There might have been up to three diseases involved, starting with an epidemic of measles, which left communities vulnerable. Then came the influenza, which claimed many victims and lastly tuberculosis attacked the remaining already weak inhabitants (Ibid:105-106).

Diseases and Christianity began to change Yup'ik culture and society also challenging their perceptions and practices of health. A process that has continued, creating discontinuity between traditional Yup'ik culture and values, and the "social relations of the larger society" lead by Western culture (Fienup-Riordan et al. 2000:13). Even though change happened fast in the Arctic, it still does not happen overnight and should be understood as a constant back-and-forth negotiation between cultures that led to new cultural identities and new negotiations. Cultures are in constant states of change and as such there is no "before and after" certain events, only a trigger of consequences and new directions taking place.

Following the epidemics in 1900, more effort was put into improving rural health care and services. In 1959 Alaska became a state. Fienup-Riordan et al. write:

During the decade after statehood, Alaska Natives generally were viewed as extremely disadvantaged, and the Yupiit of the Yukon-Kuskokwim Delta region as one of the most impoverished groups among them. Relative to other areas of rural Alaska, the availability

of Western material goods was minimal, modern housing nonexistent, educational levels low, and tuberculosis – as destructive as earlier influenza and smallpox epidemics – ran rampant (Ibid:15).

The Alaska Native Claims Settlement Act (ANCSA) was passed in 1971 marking a new era for Alaska Natives. ANCSA gave Alaska Natives 44 million acres of land and almost one billion dollars divided between 12 regional corporations and 200 village corporations. The regional corporations in the Yup'ik region are Calista and Bristol Bay Native Corporation (Ibid:16). Schools and government buildings were added to village infrastructures as it became evident from the 1976 Molly Hootch lawsuit that boarding schools were not a healthy or constructive way to educate children – far from home. The 1970s and 80s saw an explosion of new infrastructure and services in rural Alaskan villages because of the state's booming oil industry. Next to subsistence activities, public sector jobs are the most important economic foundation in villages today, for as much as 90 % of earnings come from the public sector (Fienup-Riordan et al. 2000:16-17). Today there are about 22,000 Yupiit living in 56 villages in West and Southwest Alaska (Fienup-Riordan 2005:xiv).

Health care for Alaska Natives is primarily funded by the Indian Health Service (IHS) and provided by Alaska Native organizations. However, the funding from IHS is not sufficient to cover all needs and Alaska Native Tribal Health Consortium (ANTHC) also rely on Medicare, Medicaid and private insurance payers to cover the expenses of Alaska Native health care. (Anderson 2010:430). Following ANCSA Alaska Natives developed and has managed these health service organizations through ANTHC comprised of Alaskan tribes and tribal organizations providing regional and village services (Ellsworth & O'Keeffe 2013:3). In the Interior the Tanana Chiefs Conference provides health services while in the Y-K Delta the Yukon Kuskokwim Health Corporation is the provider. Today medical care includes community health

clinics, larger regional clinics and six regional hospitals including the Alaska Native Medical Center in Anchorage.

## **2.11 Urban Yup'ik**

Approximately 67% of Alaska Natives in Alaska live in urban areas (Lee 2002:6). Between 1970 and 2000 the Alaska Native population living in urban areas increased from 19.3% to 42.3% (Smith 2007:1). The reasons for the increased migration to urban areas are explained as, “lack of wage employment to finance subsistence necessities like boats, gasoline and ammunition, escape from unsatisfactory relationships or substance abuse; and the absence of educational opportunities” (Lee 2002:6). Furthermore people living in urban areas generally have access to a broader spectrum of health care services than people living in rural areas. This is especially true in Alaska where rural areas are cut off from road systems and can only be accessed by small planes, snow machines, or boats when sea and river ice allow access. It is estimated that there is one OB/GYN physician for every 50,000 individuals in rural areas of Alaska while there is one for every 5000 in urban areas (Johnson et al. 2006:506). Yupiit living in Fairbanks have access to a variety of physical and mental health care services and can easily access the Chief Isaac Andrew Health Center located next to the Fairbanks Memorial Hospital. There are also one-hour flights up to eight times a day to Anchorage where the Alaska Native Tribal Health Consortium offers a number of specialized, high-tech treatments.

Besides the greater access to health care in urban areas it might also be said that there exists a greater structural influence on urban dwellers' perceptions and practices of health. By this I mean that Yupiit in Fairbanks are exposed to public health campaigns, a range of positive as well as negative health perspectives from a population with a variety of cultural backgrounds, health education on a higher level through the University of Alaska Fairbanks, health advertising

with implicit body images in public spaces such as supermarkets, restaurants, and shopping malls, health ads and campaigns in media, the list goes on.

Access and structural influence can be both positive and negative. The many choices might confuse and frustrate users but at the same time offer choices they would not have in a rural village. Health ads promote unrealistic body images and diets but at the same time educate about what is healthy and what is not. Furthermore, in a village there might be a stronger cultural homogeneity and thereby easier establishment of Yup'ik practices such as dancing or subsistence activities. In urban areas like Fairbanks this might be more difficult, but on the other hand, there are many Yup'ik in Fairbanks and as this study will show, once they decide to get together, there is great support for practices such as dancing.



### **Chapter 3 Analysis I: Perceptions and practices of health**

In this chapter, I analyze four young adult Yup'ik women's perceptions of health. Through interviews, conversations and observations it has become clear that one overarching concept is defined by these young Yup'ik women as inherent to good health and as defining for the strategies they have for staying healthy. This concept is balance. The idea of health as being balanced will be analyzed below. Following the section on balance, seven themes are identified as central to young adult Yup'ik women's perceptions of health. Each theme is analyzed showing how research partners relate it to health. Furthermore, this analysis shows how traditional Yup'ik worldviews are evident in the younger generation's perceptions of health in transformed and renegotiated ways.

#### **3.1 Being balanced**

I found the notion of balance to be repeated in all interviews when I asked what it means to be healthy. Sarah states:

Uhm, to be healthy... Keeping everything in balance. Making sure you move your body, you know. I mean if you are on a plane all day you know, to me, if you are on a plane all day and you've been sitting, then the next day you should really try to walk a lot, you know, or if you've been drinking a lot, then the next day you would drink a lot of...or if you've been drinking a lot of wine, the next day you drink a lot of water, you know. It's just kind of like that for me. I don't believe in like totally cutting yourself off from having fun and enjoying...ice cream, but I believe that you need to balance it out, maybe trying eating broccoli after the ice cream, later on, you know. It's just all about balance (Sarah, transcript:11).

Likewise Hannah describes being healthy as:



To be balanced mostly. I can't be overstressed, can't be overworked, can't uh... can't really have an addiction problem (short laugh) and be completely healthy or if healthy at all. So yeah, I just try to strike a balance between hard work and relaxation and just eating right (Hannah, transcript:2).

...Healthy to me means striking like an ideal balance. Just like finding the...uh the way things should be done... (Hannah, transcript:7)

To be healthy is to be balanced. It is to not overdo anything but also not to cut oneself off from doing things. It might be interpreted as the Danish saying of "everything in moderation" however it refers to more than moderation in for example food and physical activity. Bonita describes being healthy as also being happy, joyful and relieved:

If you are more at peace with what is going on in your life at the moment, then I, then you are pretty healthy. There is always gonna be stressful times in your life but if you could, if you know how to come back to your happy place or your joyful, feeling that joy, relief, then I think, as for me, that would be healthy (Bonita 02.03.14).

This is how it feels to be balanced: to be joyful and relieved of burdens. When balance is described it is in a broad, holistic perspective including spiritual aspects. Julia explains this broader balance:

...and spiritually also helps... yourself. Uhm... I'm told to eat healthy...and that we, like also, my spirit and myself, my physical body stays healthy together. And it would function better and... less...just being aware basically on both levels. Spiritually and physic, my physical body. Being aware of what's around me and what I am in-taking and being able to get rid of...stuff that I hear, not let it linger in my head, just kind of filter it out, depending on what's going on. And...myself being able to say no to certain foods or certain activities or... staying balanced (Julia, transcript:5).

Balance is to be aware both on a physical and a spiritual level. This way of describing being healthy can be traced directly back to old Yupiit teachings and to a traditional Yup'ik worldview. To some extent, such an idea of healthiness might also be rooted in mainstream American pop culture (TV advertisements, wellness 'mythology', etc.) where balance is often promoted and idealized. However in this analysis I look more specifically at how contemporary ideas and practices of health, as expressed by my young research partners, may be connected to a more 'traditional' Yup'ik worldview, as depicted by the elders who accepted to share their views on "balance" with me.

Below I analyze aspects of a traditional Yup'ik worldview in order to show how young adult Yup'ik women's perceptions of health can be understood in relation to it. To explore a Yup'ik worldview one must understand what is meant by worldview. Oscar Kawagley wrote: "Most indigenous peoples' worldviews seek harmony and integration with all life, including the spiritual, natural, and human domains. These three realms permeate traditional worldviews and all aspects of indigenous peoples' lives" (Kawagley 2009:223). Kawagley presents the notion of worldview as very close to the notion of culture: "A worldview consists of the principles we acquire to make sense of the world around us. Young people learn these principles, including values, traditions, and customs from myths, legends, stories, family, community, and examples set by community leaders" (Ibid:225). In this definition of worldview both an ontological and an epistemological understanding of culture can be found, as described in section 1.2 above. Through a worldview, people are able to identify themselves as unique and from there produce culturally relevant and specific customs, traditions, practices and perceptions.

A Yup'ik world(view) is called *Ellarpak* and provides a framework for describing, "the holistic interconnectedness of the *Ellam Yua* (the creator), the human/non-human, and the

Universe” (John 2010:14). All human and non-human inhabitants have spirits. The creator has created all these equally, meaning that natural things like plants or bones have spirits that should be respected and treated right, just as humans do. The creator co-exists within all inhabitants and “constitutes absolute connectedness and creates a sense of a holistic web of constructed and re-constructed ‘truth’ in reality” (Ibid:22). *Ellarpak* consists of three realms: *Ellam Yua*, the human/non-human, and the universe; all containing spirits, awareness, and consciousness (Ibid:22). The shared family narratives between human/non-human, *Ellam Yua* and spirits, “validates the ‘truth’ about the co-existence and social interaction of the past and present” (Ibid:23). The interconnected realms of *Ellarpak* all share a goal of keeping a balanced ecosystem, which is crucial for the continuation of life. “The survival interdependency factor is the reason it is vital to keep the social, physical, and spiritual web intact and *Ellarpak* balanced” (Ibid:25). This account of a Yup’ik worldview is centered on balance; just as my research partners’ perceptions of health are today. The ideas of how to stay healthy among young adult Yup’ik women include social, cultural, physical, and spiritual elements, which, as the quotes above show, have to be in balance in order for them to be healthy. They are not consciously connecting their perceptions of health to traditional Yup’ik teachings but the connection between them is there through the notion of balance. The realms of *Ellarpak* must be in balance in order for the Yupiit to survive: to stay healthy.

Julia, as shown in the quote above, uses the word awareness: to be healthy is also to be aware. A traditional Yup’ik worldview likewise contains an aspect of awareness. Both humans and non-humans possess awareness. Bonita describes being healthy as, “learning to appreciate what is going on around you” (Bonita 02.03.14), which might also be interpreted as being aware. Fienup-Riordan referred to being aware as being awake, while being disobedient, not following

rules and teachings of elders, is referred to as being asleep. This opposition defines Yup'ik understandings of reality and what a real person is (Fienup-Riordan 1990:74).

However Theresa John is hesitant to agree with such description arguing that it is a Western way of interpreting Yup'ik awareness. Instead awareness should be understood as being conscious. It is the process of understanding how the mind works from the inside. For example, a baby moving its body around and crawling is a sign that she is trying to become aware. The baby might not be able to speak but still she is doing something; she is trying something (John 01.21.14). Awareness is not exclusive to humans. Everything in the universe has its own awareness. Elder Paul John tells a story about some fish coming back to the same humans' net every year. The fish talks to the humans: "As a couple approached a fishnet in the water, they told their [human] guest that they came to that net every year since they cherished its owners, their [human] hosts, for their courtesy and care" (John 2010:31). The story illustrates how the fish have a consciousness just as humans do.

My young Yup'ik research partners do not tell such stories, but they do emphasize the importance of being aware when being healthy. The Yup'ik concept is still actively used while the context and stories surrounding it have changed. To some extent it has become more individualized; focusing on internal balance more than a greater universal balance. Traditionally the Yupiit believed that society: the collective was the most basic foundation of life including both humans and animals, living and dead. The individual only had meaning in connection to the collective, not on his or her own (Fienup-Riordan 1990:72, Kirmayer 1994:79). Western society is based on the conception of the individual as the center of the social, making a choice to be part of a collective or to stand outside it. Young adult Yup'ik women today are influenced by both these worldviews. Ideas of a balance and awareness that extend beyond what goes on within the

individual are found in my research partners' perceptions of health, even though their primary way of describing health and how to stay healthy are based on their choices and experiences as individual free agents. In a traditional Yup'ik worldview balance does not only refer to an internal process, but to a greater process in the universe that the individual is just one part of. An internal balance between for example spiritual, mental and physical levels is just one part of a greater balance that also includes the people, animals and natural environment around the individual.

My research partners' way of referring to a balance extended beyond themselves is for example when Sarah describes someone as healthy when they are caring towards others and conscientious (Sarah, transcript:15). Likewise Julia and Bonita do not want to say anything bad about anyone even hypothetically. They simply do not believe in holding a negative attitude or gossiping about others because it will reflect on them or get back to them in terms of an imbalance. A transformation of the traditional Yup'ik worldview is here evident, as young adult Yup'ik women have found a way to use it in their lives today albeit in a different way that only subconsciously refers back to the old teachings.

Imbalances do occur and a problem in one realm might result in consequences in another. Julia explains:

So for example yesterday, I had a migraine headache. I was trying to figure out what's this migraine headache from? Uhm and so I called one of my friends and I said, do you know, I have this migraine headache. We don't go to the same church, we are in the same prayer group though and so she goes, well, uhm my husband learned that migraine is from self-bitterness. And I was like aha, thanks. And she said what do you mean? I was like, well, this morning I didn't like yelling at my kids and I felt bad. Like I was putting myself down, oh you are such a bad mom for yelling at your kids first thing in the morning. And then, so I was like, I forgive myself for yelling at my kids, I, there is no way uhm, Satan

have authority over me, you can't make me feel bad for this because I am forgiving. And within that same minute my migraine was gone (Julia, transcript:12)

Julia is having a spiritual problem of Satan making her blame herself. Her self-blame results in a physical consequence of a migraine. Julia's story is an example of how Christianity in many ways has transformed Yup'ik beliefs. As I described in section 2.10, Yupiit people mix Yupiit ideas with Christian ideas and this mix is evident in perceptions of health. Hannah describes being unhealthy as being unbalanced:

Like too much gratification and too much indulgence in substances or behavioral, like a pattern or an activity, you know too much...yep shopping or...too much running around partying or, you know just too much, so there is an excess or just, yeah like the deficit, neglecting to fulfill certain needs...not just diet or you know personal relationships but... yeah not taking care of your responsibilities (Hannah, transcript:18).

Being unhealthy is to be unbalanced: to have something in excess or in deficit be it on a spiritual, mental, social, cultural, or physical level. One has to be aware of what is happening within as well as around one-self in order to prevent or adjust against imbalances. This is different from suffering from an illness. An illness might bring imbalances with it, but those imbalances can be overcome even if the illness cannot. This becomes explicit in connection to Julia as she suffers from hyperthyroidism but at the same time considers herself the healthiest person she knows. She also explains how the closest word for health she can think of in Yugtun is a word for staying active, but obese or sick people are sometimes much more active than thin and "healthy" people, so the word does not really translate to the Western idea of health in her opinion (Julia, transcript:5). Here again, she is indicating that being healthy might not be the opposite of suffering from an illness or having a health-related problem.

To summarize: my young research partners perceive health as a balance; to be healthy is to be balanced. Traditional Yup'ik knowledge is evident in these young adult Yup'ik women's perceptions of health through the idea of being balanced. The idea of balance has to some extent become individualized. Young women determine and assess internal, personal states of being balanced with a wide range of factors affecting that balance. The individual as in charge of health indicates a certain level of Western adjustment in young Yup'ik women's perceptions of health. However young women's perceptions of health also contain some references to a balance that extends beyond the individual to interpersonal and spiritual realms indicating a Yup'ik worldview. Illness is generally considered to cause imbalances but is not necessarily considered oppositional to health. One might be ill but able to work out any imbalances caused by illness and therefore be balanced. In the next section I analyze how research partners' cultural identities influence how they think about health and how Yup'ik identity contributes to being healthy.

### **3.2 Yup'ik cultural identity**

In this section I show how cultural identity is central to four young adult Yup'ik women's perceptions of health, both in how they think about health and how they are healthy. This study is not specifically aimed at being an analysis of cultural identity, however through conversations about health it has become evident that cultural identity plays an important role in health and functions as a strategy for staying healthy.

Bonita has a great amount of knowledge about how to live a healthy traditional Yup'ik life. She talks about how what used to be is still valid: "I mean, what did, what did our people used to do to keep healthy (...) I would probably say keeping active in your communities. Like going to native dances, you know participating in your traditional values like gathering, hunting/gathering, preparing, processing" (Bonita 03.02.14). However she also explains how it

is hard to use and apply traditional activities outside a rural village context and so to be healthy she tries to mimic her mother's state of mind: being happy and making sure not to be stressed out (Bonita 02.03.14). Julia, when asked where her idea of balance comes from, explains that she started thinking about being balanced when she was diagnosed with hyperthyroidism and went to see a nutritionist. However she becomes unsure of whether that nutritionist actually introduced the notion of balance to her or if that was something she thought of. Instead she remembers that her mom tried to tell her about it but she never listened. Not until she really had to in connection to her diagnosis (Julia, transcript:6). Sarah and Hannah both distance themselves from their mothers' lifestyles and argue that if anything, they have learned from them how not to behave in order to be healthy.

As these accounts show when asked if someone has told them about balance or taught them about it, research partners are hesitant. They are not sure why that is the notion that comes to mind in connection to health. They struggle to see any connections to their parents' and grandparents' ideas of health, either because their parents did not teach them any or because parents live lives very different from how young adult Yup'ik women live in Fairbanks. There is a disconnect between what their parents' generation has done and is doing in the village and what the young women themselves are able to do and want to do in their lives in Fairbanks. However these young adult Yup'ik women's perceptions and practices of health bear evidence of a transmission of knowledge as shown in the previous section. Through the notion of balance young women are transforming and renegotiating their parents' strategies for staying healthy in a different context and on a predominantly subconscious level. As Bonita states, she tries to mimic her mother's attitude in life: her positive state of mind. Hannah and Sarah might not see any direct influence from their mothers, however both their mothers lived through tremendous



hardship including violent abuse, alcoholism, cancer, mental illnesses and unnatural deaths of family members. They have survived and they continue to survive under very difficult conditions and I see that same will to survive in both younger women, as they have obtained college degrees, made careers, and provide for themselves. Both Sarah and Hannah have gone through difficult times in their lives and they have continued to move forward and stay strong, resourceful Yup'ik adult women. As stated above, there is a transmission of Yup'ik knowledge evident in my research partners' perceptions of health even if it might be on subconscious levels. They are influenced by traditional Yup'ik knowledge. They are renegotiating it and using it in new ways and contexts.

The renegotiation of traditional Yup'ik knowledge sometimes makes it difficult for a member of the elder generation to recognize that it is still in fact present in the younger generation's lives. Likewise the elder generation's verbalized disappointment with the younger generation's lack of cultural involvement is echoed in young women's self-images and confidence in their own cultural knowledge. The renegotiation of traditional knowledge is primarily based on the navigation of mixed Yup'ik and Alaskan culture. The context in which young urban Yup'ik women live is both Yup'ik and urban Alaskan. They are practicing Yup'ik dancing in university settings while texting on their iPhones or uploading the dancing to YouTube. Yup'ik and Western (Alaskan) culture have co-existed and developed over several generations of Yupiit and sharp divisions between what is Yup'ik and what is Western (Alaskan) are impossible (as well as irrelevant) to make. Traditions and ideas from the two cultures have merged together into transformed, renegotiated forms that define what it means to be Yup'ik today. Henze and Vanett criticize the idea of "walking in two worlds" as a possible way to

understand this Yup'ik/Western cultural context. They argue that while it might at first seem like a valid metaphor, it is in fact misleading:

The reality of many diverse worlds coalesces to become two idealized worlds, and the implicit assumption that it is possible to 'walk' in both sets students up for failure. Ironically the metaphor becomes a barrier rather than a model of how to live in the world today (Henze & Vanett 1993:123).

It is misleading to make a divide between two worlds and reality is not divided by Yup'ik/Western or traditional/modern oppositional categories. The ideas of health that young women express are expressions of their Yup'ik identities in its current form based on influence from many different interpretations of Western (Alaskan) and Yup'ik culture and society. Their ideas might also be different from young adult Yup'ik women living in rural villages experiencing different mixes and clashes of Yup'ik and Western traditions and culture.

As shown, the idea of balance can be traced directly back to a traditional Yup'ik worldview, but my research partners do not think about themselves as very connected to such traditional worldview and none of them express the idea that their notions of health are a product of the Yup'ik worldview. Instead they are much more likely to dismiss the idea of any significant traditional Yup'ik cultural influence or transmission of knowledge on their notions of health and strategies for staying healthy. It should be noted that the women differed on this matter. Bonita and Julia have stronger family ties to villages and they talk much more about Yup'ik culture and activities while Sarah and Hannah have complicated ties to family in villages and talk less about Yup'ik culture and activities. They both however express sincere wishes to practice Yup'ik culture more. All four express insecurities about their Yup'ik knowledge and question whether they are "Yup'ik enough" to answer my questions. They seem to be somewhat unaware of how

much of a Yup'ik cultural identity they have and how it defines their ideas of health. As indicated earlier, I found a correlating discourse when talking to elder Yupiit women. Ruth stated:

Somehow they've lost it, maybe their parents went to boarding school and never learned those...they didn't grow up with that, grew up with people that didn't know how to parent or they just, when they went back to...there were no... (Ruth, transcript:8).

Theresa John explains in similar terms that young people have lost touch with Yup'ik culture, and Yupiit cultural values and knowledge have to be restored and invigorated in the younger generation today (John 01.21.14). My young research partners are saying that they do not have very much traditional Yup'ik knowledge. Elder Yupiit are saying that young Yupiit do not use very much traditional knowledge. However, I observe and hear young women that do, in fact, have and use traditional knowledge and the ones that do not would very much like to. Theresa John claimed that my research partners are role models for their generation and that their use of traditional Yup'ik knowledge is greater than many of their peers'. Keeping this in mind, I argue that it is important to acknowledge that cultural values and knowledge might take on new shapes. Knowledge is always developing and transforming through new ways of negotiating culture.

The purpose of this analysis section is to plant a seed: to suggest that maybe these young Yup'ik women *do* use traditional Yup'ik knowledge – just not in the ways their elder generation would. Furthermore, it may just be the case that the perception of the younger generation as a hopeless and westernized young generation is itself a key factor in helping to create the hopelessness itself. If young women are being told that they do not know anything about their culture, then they will believe that they do not know much about their culture. While in fact, as observed in my Yup'ik research partners, they do. This is supported by Barnhardt and Kawagley who write:

Indigenous peoples throughout the world have sustained their unique worldviews and associated knowledge systems for millennia, even while undergoing major social upheavals as a result of transformative forces beyond their control. Many of the core values, beliefs, and practices associated with those worldviews have survived and are beginning to be recognized as being just as valid for today's generations as they were for generations past (Barnhardt & Kawagley 2005:9).

Today's generation is using core Yup'ik beliefs and practices based on the notion of balance in their strategies for staying healthy. Traditional epistemological ideas are foundational for understanding the connections between past and present and when they are discontinued a problematic "hole" replaces it. Young people today do not always see how they are connected to the past and the teachings of the spiritual and creator realms. Because they were not systematically taught about them, their connections (present to past) are unclear. That does not mean they are not there. It is a question of making the connections: linking the knowledge these young women have and the traditional knowledge they are influenced by. Theresa John writes of this dilemma:

The question is how much of the Yup'ik traditional knowledge system remains, knowing that I have been affected by the impact of the outside influences of the Catholic boarding school, the church, and Western culture? What and how much Yup'ik is left with me? I honestly believe the elders' words of wisdom and critical cultural dance meanings have a role as a solid and absolute Yup'ik principles in my life that serve as the vital semiotic tools to know who I am as a Yup'ik professional dancer, scholar, and woman today (John 2010:51)

As a member of her generation Theresa John struggles to believe in her Yup'ik identity. Likewise young research partners question how much of a traditional Yup'ik worldview they possess. Looking to Bourdieu, the subconscious transformation and renegotiation of Yup'ik knowledge

and culture is connected to the notion of habitus. How young adult Yupiit women perceive health depends on their habitus. Bourdieu writes:

The theory of practice as practice insists, contrary to positivist materialism, that the objects of knowledge are constructed, not passively recorded, and, contrary to intellectualist idealism, that the principle of this construction is the system of structured, structuring dispositions, the habitus, which is constituted in practice and is always oriented towards practical functions (Bourdieu 1980:52).

Bourdieu explains that the habitus is a product of both individual and collective history that is constantly evolving (Ibid:54). The habitus is an “infinite capacity for generating products – thoughts, perceptions, expressions and action” (Ibid:55). As explained in Chapter 2, if habitus is accepted as a basic principle of the organization of human action, then it is possible, with a Bourdieusian perspective, to analyze *why* people think the way they do and why they act the way they act to a certain point. Beyond this point I argue that it is necessary to extend Bourdieu’s theory to include an aspect of renegotiation as analyzed above. I will return to this point after analyzing young adult Yup’ik women’s habitus and doxa.

The habitus is the outcome of how a particular group believe they are to act and think. In order to understand people’s practices, one has to explore the social conditions in which the habitus was produced (Ibid:56). The social conditions of Yup’ik women vary depending on whether they live in rural or urban areas of Alaska, but generally Yup’ik women are part of a lower economic class. They are not highly educated. They live or have grown up in remote areas of Alaska with limited access to Western society’s comforts of technology, varied food options, transportation, higher education, and higher-paying jobs. They marry and have children very early compared to Western women. Many are single mothers. These are some of the social

conditions in which Yup'ik women's habitus is based. My research partners now live in Fairbanks, but they have all lived in villages and their families still live in villages. They are college-educated but currently have low-paying jobs or are unemployed.

Another important part of social conditions is the historical background of a group of people, which I have described in section 2.10. Bourdieu writes: "The habitus – embodied history, internalized as a second nature and so forgotten as history – is the active presence of the whole past of which it is the product" (Ibid:56). Likewise, Erickson and Murphy argue that habitus is the individual's social positioning and personal history (2003:163). Bourdieu writes:

(...) Being the product of a particular class of objective regularities, the habitus tends to generate all the 'reasonable', 'common-sense', behaviors which are possible within the limits of these regularities, and which are likely to be positively sanctioned because they are objectively adjusted to the logic characteristic of a particular field, whose objective future they anticipate (Bourdieu 1980:56).

Hence, habitus is a combination of historical and social conditions that together shape the premise for how one thinks in the present. In this way, habitus is similar to the idea of culture as the characteristics of a group of people. It is different, however, because the characteristics of a group of people might be taken to mean traditions, rituals and language, which are graspable actions while habitus is not. It is as if habitus is on a deeper, more abstract level than cultural characteristics, but perhaps not more abstract than culture itself in its epistemological form. Sherry Ortner explains that: "The fundamental assumption of practice theory is that culture (in a very broad sense) constructs people as particular kinds of social actors, but social actors, through their living, on-the-ground, variable practices, reproduce or transform the culture that made them" (Ortner 2006:1752). The young women in this study transform and renegotiate Yup'ik

culture based on the practices and conditions they have available to them in Fairbanks. They move from villages to the city but the village is not left behind. The villages are the hubs of Yup'ik cultural activities and young women negotiate their identities in the world with the values they have from a cultural system that is already in place (Fienup-Riordan et al. 2000:154-55). Contrary to diaspora cultures, Yupiit women do not have a cultural homeland that is constructed through metaphors and other people's memories. They have a homeland that they are connected to and routinely return to when they wish. The older generation of Yupiit that I have talked to raise concern about the Yup'ik culture disappearing as young people are increasingly adopting Western lifestyles and modern luxuries. They are concerned that Yup'ik communities are disappearing because of this. Fienup-Riordan et al. call for this theory to be turned on its head:

Yup'ik communities are not disintegrating, their lifeblood gradually seeping away. Many can be seen as actually expanding and recreating themselves in unprecedented ways (...)  
Yup'ik men and women may be anywhere in the world and still not live outside the Yup'ik community in this larger sense (Fienup-Riordan et al. 2000:152-53).

Through bonds of sharing and exchanging Yup'ik values, Yup'ik culture is very much alive albeit in new, renegotiated ways (Fienup-Riordan et al. 2000, Lee 2002).

If there has been one major change in the constitution of Yup'ik community, it is not the replacement of the local by the global, but the mixing of different local identities in the creation of an emergent Yup'ik alternative. Anchorage's Yup'ik community includes men and women from every village in the Yukon-Kuskokwim region. Each brings to the table special vocabulary, songs, stories, foods, and family history. Like the meat given away during a village seal party to insure successful harvests in the future, by sharing who they are they seek to retain their special Yup'ik identity in perpetuity (Fienup-Riordan et al. 2000:168).

Through the historical and social conditions of my young research partners' habitus I have touched upon the structured dispositions that shape their actions. Adding to the theory of habitus with the help of Ortner and Fienup-Riordan, I introduce the notion of renegotiation as already analyzed to some extent above. Research partners configure what it means to be healthy as young adult Yup'ik women taking a traditional Yup'ik notion of balance and transforming it into something that they can use and relate to in a contemporary, urban context. The idea of renegotiation can be understood in connection to assimilation where a majority might demand how a minority conforms to their terms and the minority accepts these demands. The minority, here being Yup'ik, has an active role in assimilating and not assimilating to Western society in Fairbanks. They are not only products of their habitus but also of the renegotiation that comes with assimilation. Therefore it is necessary to extend Bourdieu's theory to include a process of renegotiation to provide a more complete understanding of these four young adult Yup'ik women's perceptions and practices of health.

Bourdieu's theory can help explain how the traditional idea of balance is evident in four young adult Yup'ik women's perceptions and practices of health even when they are not consciously aware of it. His theory can connect the abstract idea of habitus as social and historical conditions that shape individuals' actions with the present perceptions and practices of these young adult Yup'ik women. He explains that individuals navigate all of the choices laid out in front of them by using their practical sense. Bourdieu explains practical sense as a "feel for the game" (Bourdieu 1980:66). He writes: "Practical sense is not a 'state of mind', still less a kind of arbitrary adherence to a set of instituted dogmas and doctrines ('beliefs'), but rather a state of the body" (Ibid:68). Individuals make choices in their lives based on the habitus instilled in their bodies as a practical sense: doxa. Yup'ik women are guided by an idea of balance instilled in



them as a practical sense that Bourdieu calls doxa. Through the idea of balance they carry with them a traditional Yup'ik worldview as a sense that is not necessarily explainable by/to the women themselves. It just is. It is something that has been instilled in them from when they were born. These young Yup'ik women carry this sense, or doxa, with them and they use it to navigate the world they live in. The taken-for-granted things they do to stay healthy are undertaken in relation to their doxa: the things done in correlation with both habitus and the "field" in which they reside. This is why my research partners struggle to explain from where their conception of balance originates. Bourdieu explains: "Doxa is the relationship of immediate adherence that is established in practice between a habitus and the field to which it is attuned, the pre-verbal taking-for-granted of the world that flows from practical sense" (Ibid:68).

Parkin explains doxa writing: "Those aspects of society's norms and values that are not discussed or challenged because they are deeply rooted through socialization and taken for granted" (Parkin 1997:376). One partner, Bonita, does comment on where her ideas of health might originate. When asked what it means to be healthy Bonita says: "I honestly can say, knowledge of your history basically" (Bonita 02.03.14). Julia, similarly to Bonita, refers to traditional knowledge as important and something that her parents passed down to her but this is as close as they come to explaining from where they have their ideas. Sarah and Hannah do not talk about knowledge passed on from their parents the same way as do Bonita and Julia. They both describe complicated relationships with their mothers and a need to distance themselves from their mothers' worldviews and ways of life. In this way it could be argued that all four women have the same doxa as they live in Fairbanks under similar circumstances and on some level have the same cultural foundation instilled in them. The reason these four women share a notion of health is because they share a doxa. Their doxa lies in the notion of balance that can be

specifically linked to a traditional Yup'ik worldview, although the young women themselves do not articulate this connection. Traditional Yup'ik knowledge is guiding them to stay healthy as a practical sense that is expressed in the notion of balance.

Not all young adult Yup'ik women necessarily share doxa for they live in very different rural and urban areas. Not surprisingly, I find some differences among my four young research partners. In particular, there appears to be a divide between Julia and Bonita on the one hand and Sarah and Hannah on the other. Julia and Bonita carry their Yup'ik culture proudly with them, while Hannah and Sarah have more obscure relationships with their Yup'ik culture through their relationships with their mothers. As such I interpret their perceptions and practices as grounded in a shared doxa based on slightly different habitus. Their shared doxa is significant also because it allows me to say something about them as a group despite their differences. As I will later show, this shared doxa also allows me to indicate a broader consensus among Yupiit on what it means to be healthy.

Young adult Yup'ik women's doxa affect how they think and act. The notions of health as being balanced include references to both Yup'ik and Western ways of thinking, which distinguishes them from a traditional Yup'ik worldview. This is where there is a renegotiating of what it means to be Yup'ik and what it means to stay healthy as a Yup'ik woman in a contemporary, urban context.

At this point in the analysis I have advanced three major claims. First, the four young adult Yup'ik women's ideas of health should be understood through the notion of balance: to be healthy is to be balanced. One's balance is constructed and affected by a number of different factors and extends beyond the individual to include natural and spiritual realms. Second, the fact that my research partners all share this idea of balance is because they share a doxa grounded in

their shared Yup'ik cultural background including a traditional Yup'ik worldview. Third, the idea of balance as rooted in traditional Yup'ik knowledge has been transformed into the current idea of being balanced through renegotiations of what it means to be Yup'ik today. As such young adult Yup'ik women's cultural identities play an important role in how they understand health and practice health despite their own uncertainties about this.

In the following sections the various factors that influence balance will be explored and I will show how these women's doxa is continuously shared and renegotiated to make sense in a contemporary context.

### **3.3 Exercise**

In this section I will show how exercise is connected to the notion of balance in young adult, Yup'ik women's perceptions of health. All research partners describe exercise as a primary factor in health. It is a way to maintain a healthy physical body and it is also a way to maintain one's mental health and the strength to be able to do the hard manual labor required in some jobs. Sarah explains:

Exercise is just this mental health lifesaver for me. I like to jog. And if I don't have a run in I go a little ape shit, you know (laughs). I'm just one of those (...) I don't like my body feel like a noodle, you know. I am small but I like to feel strong, you know. I like to know that I can uhm, have more endurance. Uhm, I can last longer. You can handle stress better when you are physically fit, you know (Sarah, Transcript:11-12)

In this quote it is evident that exercise has several functions in health. It balances out both physical and mental levels. Exercise is a trigger that can help to maintain balance in many different ways. Hannah describes how she used to be healthier when she exercised: "Uhm I was probably my healthiest when I was 24. And uh, I was either running or biking everyday. Walking

to work, uh, just, I guess I was just fit” (Hannah, transcript:4). Bonita describes how it was a lot easier to exercise in the village because exercise was just a natural part of the chores she had. For example, during fish season she would help her father get the smoke house ready by packing water and getting logs. Everything revolved around physical activities, which is not implicitly part of her life in Fairbanks. She does not do any subsistence activities here, such as picking berries or going fishing. However she does dance, which is her primary way to exercise (Bonita 02.03.14). I will discuss this further in Analysis II below.

Exercise is the aspect of health that seems to have the greatest contrasts between what research partners say they ought to be doing and what they actually do. It is not that they do not exercise, for all of them fit exercise into their daily lives, but none of them feel they are doing it to the extent that they ought. Hannah describes this saying: “I think it would be easier for me to get through my work weeks, uh to exercise regularly but... I’m not perfect at the balance but I know what I should be doing” (Hannah, transcript:2). These women reminisce about when they used to exercise more and express frustration about their current lack of exercise. In other words, they talk a lot about what they ought to be doing.

The tendency to describe what one ought to be doing instead of what one is actually doing is normal in interviews about perceptions and practices. Sociologist Simon Williams explores such issues, questioning whether practices can be investigated at all. He argues that individuals take themselves and their social worlds for granted; they do not think about how they act because they do not have to (Williams 1995:582), and therefore they have trouble turning practices into words. Williams writes: “Health-related behavior can be seen as a largely routinized feature of everyday life which is guided by a practical or implicit logic” (1995:583). This logic of practice might also be called *habitus* as analyzed earlier. People tend to not talk or think about health until

they are specifically asked about it or they have a problem with their health, such as suffering from one or another kind of illness. Williams argues that much of what is important to learn about practices is left unsaid, such that: “Tacit features of social life are passed by in silence and remain unspoken” (1995:584).

This has not been my experience with research partners in this study. They provide detailed and personal accounts of how they meet or do not meet their own expectations and ideas for how to be healthy. Exercise is a great example, since research partners honestly compare what they ought to be doing with what they are doing. Williams argues that they will leave the second aspect out; but, in fact, they do not, perhaps because this study is specifically framed to ask for Yup’ik women’s thoughts on what it (at least in an ideal sense) means to be/stay healthy and then what they actually do: perceptions and practices. Interviews have proved dynamic when comparisons between perceptions and practices are accompanied by smiles or frowns depending on how far research partners are from making specific health-related goals happen. As such it is sometimes impossible to separate perceptions from practices. This is evident in this analysis as it is difficult not to talk about practices when looking at perceptions. They are closely linked and instantly compared by research partners. Exercise is one aspect of health where all research partners feel unsuccessful to some degree, as these practices do not satisfyingly meet their expectations.

The elder generation’s discontent with the younger generation can be found again with regard to exercise. Elder Ruth explains how young Yup’ik women and men today do not use traditional teachings that emphasize exercise anymore: “They have lost touch with nature, the health, the health of physically walking and then being part of the element” (Ruth, Transcript:3). She continues to explain that a natural way of healing in the Yup’ik tradition is to take walks on

the tundra. Likewise elder William describes how he walks everywhere. His legs are his primary mode of transportation when he moves around Fairbanks but he cannot get his (younger) girlfriend or daughter to walk anywhere with him (William 11.03.13). The elder generation again expresses disappointment with the younger generation's lack of use of traditional knowledge. However, tundra walks have been adopted into contemporary practices of traditional healing for stress and mental illnesses. It is a way to learn how to be aware of one's surroundings and of the land (Mills 2004:60). Contrary to Ruth and William's statements several of my young research partners gave examples of how they walk as a form of exercise to keep them healthy. Obviously since they are in Fairbanks they do not walk on the tundra, but they do use walking as a primary way to exercise and stay healthy. Julia tries to walk at least four miles a week, Sarah jogs or walks her dogs, Hannah reminisces about when she used to walk, and Bonita mentions walking as a way to exercise next to dancing. All four women share the practice of walking and the perception of it as being healthy. I argue that one explanation here could be that they have reconfigured the traditional Yup'ik practice of walking on the tundra into jogging or walking around their urban neighborhoods. However they do not explicitly express having traditions of walking on the tundra or a tradition of walking anywhere for that matter. Therefore another explanation might be that walking fills a void where a tradition was discontinued rather than walking being an actual continuation of a tradition. Either way moving one's physical body is important to maintaining balance.

The last aspect of exercise I will analyze is how research partners tend to mention role models based on their abilities to exercise. Hannah names her good friend the healthiest person she knows because: "She practices capoeira and she just walks a lot, doesn't smoke. She is one of the healthier people I know" (Hannah, transcript:3) On the other hand, exercise can also be

why someone is not healthy. Sarah names a co-worker the unhealthiest person she knows because she is overly obsessed with exercise. She is in fact a body-builder and she exercises more than anyone else Sarah knows: “She is probably physically much healthier than any of us, she doesn’t drink, she doesn’t smoke, but she is very rigid and disciplined and it’s really hard on her. Like she doesn’t seem to be happy” (Sarah, Transcript:15). Even though exercise is mentioned as a primary way to stay healthy, a person is not necessarily healthy just because she or he exercises. It is one of many aspects of staying healthy that when combined makes a person healthy: makes a person balanced. The body-builder co-worker is not balanced; she is obsessed with her physical body and neglecting other aspects of her health, such as having a happy state of mind.

### **3.4 Food**

Julia, Sarah, Bonita, Hannah and Ruth all state that food is a vital part of health and staying healthy. The young women’s explanations of why food is important in health are primarily based on three factors: nutritional value, access, and personal preferences/tastes. The women prioritize eating fresh fruit and vegetables, emphasizing how this was never an option when they lived in villages. Bersamin et al. (2006:1055) argue that a major concern of rural Yupi’k diet is the low consumption of fruits and vegetables. There are local berries and wild greens that could fill this hole but the consumption of these is not high enough. Research partners are taking advantage of the easy access to such foods in Fairbanks.

Julia describes a more extreme diet than other research partners. She is on a strict diet because of her hyperthyroidism. She only eats fish, meat, and vegetables, no sugar, noodles, rice or eggs (Julia, Transcript:3). She drinks green smoothies every day and has her family on the same diet most of the time. Sarah prioritizes having money in her budget to buy the food she would like, working on a day-to-day want basis. Her husband goes hunting and fishing and they

enjoy salmon and moose year-round. She does not describe it as a traditional food instead she talks about it as an Alaskan tradition that her non-native husband pursues. Hannah focuses on home cooking with whole, fresh produce and beef. She contrasts her diet to her dad's diet: "My dad's diet is in my opinion atrocious. Just cheese, cheese, cheese (laughs). And processed foods, microwaved food. And I'm not strictly organic or anything like that but I buy when I can and I know that whole foods are the best way to go" (Hannah, transcript:5). The quote illustrates how for Hannah, healthy food is whole, organic food: simple, basic foods that have identifiable ingredients. Hannah would like to replace beef with moose but she does not go hunting and she does not have a network that can support her with it (Hannah Transcript:3). Bonita emphasizes the importance of cooking as a way to stay healthy. She recently learned how to cook and really enjoys it (Bonita, 02.03.14). Her favorite food is birds caught out on the Y-K delta. Salmon is also something she enjoys. Julia and Hannah do not go out to eat very often, actively trying to cook at home, while Sarah is more likely to eat out. Children might be a factor in this life style choice. As shown here, all four women value traditional Yup'ik food, as well as fruits and vegetables, that are difficult to get in rural villages. They have renegotiated their food choices and habits based on what they have available to them in Fairbanks.

A particular comment might be made on the intake of junk food. Julia emphasizes that she used to eat a lot of junk food, such as instant noodles in the village, which was unhealthy and she has cut that out of her life. Likewise Sarah describes her late teens-early 20s where she used to be less healthy: eating junk food and drinking more, as well as her concerns about her 14-year old sister who is eating way too much junk food in the village. Hannah defines store-bought food in the villages as the most unhealthy food because it is highly refined, processed chemically, has



lots of high fructose corn-syrup and is just terrible (Hannah, transcript:10). The older generation of Yupiit also raise concern about junk food, William states:

I don't believe that they should have any fast food joints. I don't think they should put them on TV and all that stuff just to make money of people and they are not thinking about the people. They are thinking about their pocket (...) They are not after your health. They are out to destroy your health in my opinion (William 11.03.13).

Junk food, as well as processed, store-bought food, is considered unhealthy by all Yupiit research partners. Hopkins (2003:58) writes that younger Yupiit in rural villages generally eat a lot more store-bought foods . Hopkins found that middle-aged women's diet is changing and they are eating more store-bought foods (Ibid:59). I see the same trend among my research partners, which indicates that it is not just a matter of rural/urban location but also a general cultural phenomenon. However where Hopkins argues that this has serious physical health consequences because store-bought foods are high in sugar and fats, I am hesitant to argue the same in an urban context where store-bought foods also offer a variety of fresh, whole produce.

As mentioned at the beginning of this section on food, research partners explain how food is a strategy for staying healthy in terms of nutrition, access and preferences. They do not describe food on a general, perceptual level but immediately describe their actual food practices. When asked about what it means to be healthy, Julia for example answers:

I'll start of with how we started learning about health. Like being healthy and stuff. When I was pregnant with my son I had gestational diabetes and so we had to see a nutritionist and she kind of gave us a little idea about what's good and what's bad. Mainly about the hydrogenated oil and the processed food (Julia, transcript:3).

This quote shows how Julia goes directly into a description of her food practices when asked about health. It also shows just how central food is to health as it is the first thing she thinks of. The link to a traditional Yup'ik relationship to food might not be evident at first in young adult research partners' strategies for staying healthy. However through observations and participation it has become clear that sharing food, which is a central Yup'ik tradition, exists. Elder Ruth explains how food in a traditional Yup'ik worldview, as everything else, is connected to *ellam yua*. Food is a part of the universe and the cycle of life. It should be treated with respect and as equal to humans in order for balance to be maintained. This is with direct reference to subsistence foods. Ruth refers to several Yupiit stories that illustrate the Yup'ik relationship to food. However, she expects that I already know these stories and refuses to share one with me. Instead I share a story that I have already briefly described but here told by a different elder, John Active:

Once there was a little black fish swimming up a stream (...) He saw a camp where people were living. The people there were very careless. Their camp was unkempt and their belongings were strewn around (...) Bits of whatever they were eaten would drop from their hands or out of their mouths onto the ground as they talked. The little blackfish heard much wailing and crying at this camp. Those cries were the weeping and wailing of the bits of food that had fallen to the ground (...) The little blackfish said to himself, 'I'll not swim into this man's fish trap. He's too careless with his food (Active 1998)

This is a segment of a Yup'ik teaching stemming from John Active's grandmother Maggie Lind of Bethel. The story ends with the little blackfish finding a family that respect their food and leave no waste around; feeding leftovers to their dogs and burying any remains. The story illustrates a traditional Yup'ik relationship to food. John Active's grandmother also used to take a bit of everything that was served at a meal and bury it for the ancestors. This illustrates another aspect of Yup'ik sharing, which occurs not just among people, but also with the greater universe

and spirits. Food, in Ruth's reference, comes from the land. This is the food that nourishes and binds the Yup'ik people together (Ruth, transcript:9). Likewise Fienup-Riordan writes: "Harvesting, sharing, and consumption of food from the land are important markers of what it means to be Yup'ik" (2005:239).

Traditional Yup'ik foods are difficult to come by in Fairbanks. Seal, whitefish, and whale have to be shipped in and research partners depend on family members and social networks in villages to provide them with these. William explains how just a little bit of whale meat costs hundreds of dollars to ship in from the village (William 11.03.2013). Therefore traditional foods are not a great component of research partners' diets as they might be in rural areas of Alaska where access to these foods is easier. My research partners also live in a large town with access to a variety of international cuisines, which might diminish the need for traditional foods from a nutritional perspective. They describe how animals that they fish and hunt are shared among family and community members. Julia and Bonita receive packages from their parents back in the villages with food from the land. At the time of our formal interview Julia had just received a package of seal blubber and meat. The coastal Yup'ik foods are her favorites but she also enjoys the Interior foods of salmon and moose. She describes them more in terms of luxury, favorite foods than essential foods for health. If she lived in the village, that might be different. Julia shares her food with me: serving me seal meat soup. Likewise Sarah shares smoked salmon with me and Hannah offers me beef stew. The sharing with the greater universe might be missing from young research partners' accounts of how food is connected to balance and health, but the aspect of sharing is there. Subsistence foods are valued but primarily from afar. Consumption of food and sharing food are the aspects of traditional Yup'ik practices that will be discussed further in

Analysis II. Here it is just relevant to illustrate that food is connected to health both in terms of nutritional value but also as a way to share with and to give to one's community.

### **3.5 Stress**

Before I comment on stress as an aspect of health I would like to note that I have consciously chosen to not call this theme mental health. Mental health is a vague term and based on my conversations with Yup'ik women I would not be able to provide a satisfying picture of what mental health means to them. Two of the women have dealt with mental health issues but it is not something they consider relevant to my study on how to be healthy and they chose to not discuss it in-depth in our formal interviews. In contrast, stress is something that all four women talk about and actively try to avoid because it is unhealthy. Stress can come from all aspects of life. It can be stress from work, from family situations, from relationships, from eating wrong, from not exercising, from not keeping up with spiritual connections, or simply from being unbalanced. It can be commonplace stress in a conventional situation like what to eat for dinner or it can be acute stress brought about by major life situations. Hannah describes how a situation might make her stressed out: "The stress of being homeless and couch-surfing with a young child uh you know, not when my child was in my direct uh... not when I was taking care of him, but he would be with family, and I just self-medicated way too much" (Hannah, transcript:4). Here a number of social health issues are evident: being homeless, not being able to take care of her child, and self-medicating. However it is the stress of all of that, that Hannah emphasizes as unhealthy. Bonita describes being healthy as when one is not stressing (Bonita 02.03.14).

Wolsko et al. (2007:56) examine stress as a factor in health saying that Yup'ik women report stress more often than Yup'ik men. They also state that stress levels are greater the less Yup'ik cultural activities people practice.

Participants who reported living more of a Kass'aq [White people] way of life (greater acculturation) reported experiencing greater psychosocial stress and greater use of drugs and alcohol to cope with stress. In contrast, participants who reported identifying more with the traditional Yup'ik way of life reported greater happiness, using religion and spirituality more to cope with stress (Wolsko et al. 2007:58).

This quote shows how stress is closely related to Yup'ik cultural identity. My research partners confirm this as they seek out Yup'ik activities in times of distress. For example, Hannah is currently without a job or career and she has decided to explore her Yup'ik identity as a way to find out what she should do next. Bonita engages in Yup'ik dancing as a way to release stress, which I will discuss further in Analysis II. Stress is something that research partners accept that they cannot avoid, but when it appears they try to act to release it and to restore balance.

### **3.6 Substance use**

Tobacco, alcohol, caffeine and sugar are four substances that research partners use or used to use on a frequent basis. Three of the women smoke tobacco regularly. Use of tobacco, as shown in section 2.9, is a major health hazard among Yup'ik women. Bonita, Sarah and Hannah all describe it as something that is unhealthy, but at the same time indicate it as a stress reliever. It might be physically unhealthy, but mentally it functions as a temporary relief. As shown above making sure that stress is kept at bay and making up for being stressed by doing something to counter it is believed to help keep a person balanced. Hounsgaard et al. (2013) find that Greenlandic women do not always consider smoking unhealthy or at least they can make up for it by being healthy in other respects. One young woman in their study considers herself healthy saying: "I smoke five cigarettes a day, I do not exercise that much but I eat a varied diet" (p. 4). She might be smoking but she also eats healthy. Here again, the idea of balancing things out is present – in a very practical sense. My research partners also justify their smoking. Hannah states:

“I am a smoker right now. I hopefully will quit, but maybe I don’t. Or maybe I pick it up later in life and I develop lung cancer. Or maybe I quit and I still get lung cancer” (Hannah, transcript:5). Hannah accepts that she might get lung cancer from smoking, but she might get that anyway so why should she stop? However, when it comes to naming healthy people in their lives, research partners define these as healthy because they are not smoking. So even though there is a certain amount of justification about smoking, research partners are very aware of it being unhealthy.

Three research partners talk about drinking alcohol. As mentioned earlier, Sarah recommends drinking a lot of water after a night of drinking wine to weigh out the negative impact alcohol might have on her balance. Hannah describes how being a good mother means not being drunk, to manage alcohol in a responsible way (Hannah, transcript:9). Hannah and Sarah both describe their mothers as alcoholics. They are very aware of their own consumption of alcohol and know that they are at risk of developing addictions of their own. Both have had periods in their lives where they drank too much and they are being careful about alcohol today. Bonita describes her consumption of alcohol as moderate and, while not healthy, is not an issue either. The remaining partner, Julia, very deliberately does not mention alcohol at all during interviews, which is not necessarily an indicator of her not consuming it but choosing to not share that part of her life with me and choosing not to speak of others’ use/abuse of alcohol. It might also be a direct result of her hyperthyroidism: she simply cannot drink alcohol. Sugar and caffeine have been Julia’s huge vices in the past. She used to drink at least one energy drink a day and eat candy and drink soda often. Now she has completely dropped sugar and caffeine due to her diagnosis. Sarah does not consume much sugar and she is appalled by the amount of sugar her younger sister is consuming and, as shown earlier in connection to balance, argues that “if you eat a lot of ice cream then try to also eat some broccoli to weigh up for it” (Sarah, transcript:11).

Tobacco, alcohol, sugar and caffeine are considered to cause imbalances, to be symptoms of an imbalance, or to balance out stress temporarily. They have diverse roles but primarily are considered unhealthy. Alcohol carries particular strong connotations to the darkest aspects of village life and negative sides of being Yup'ik today. Therefore research partners do not dwell on them in their conversations with me. In discussions of what it means to be healthy alcohol is treated mostly as contrasts to what it means to be healthy— not as directly relevant.

### **3.7 Spirituality**

Before I analyze how spirituality is connected to health for the four young adult Yup'ik women, I would like to comment on how spirituality and religion should be understood here. Religion is spiritual and spirituality can be considered religious. As such it can be difficult to choose what label should be used in which contexts. In connection to the Yupiit a divide is often made between Yup'ik spirituality and Western, Christian religion. As I have described in the context section 2.10, Christianity challenged and changed Yup'ik ideas of spirituality and in many places people accepted Christianity because they were able to merge their spiritual ideas with the new religion (Litecky 2011:76, Fienup-Riordan 1990:112). Julia explains her relationship to Christianity, particularly Pentecostal Christianity, as different from her relationship to religion. She says that “religion is part of the world and man-made” while Christianity is having “a relationship directly [with God] without any ritual stuff” (Julia, transcript:9). She says: “I was into religion before and to me it never got me anywhere. I never felt any better, I never...it didn't help me basically. And...I just...I just like to be aware of things. Being direct” (Julia, transcript:9). Pentecostal Christianity is here understood as something different from religion, where the individual is aware, a notion that is central to Yup'ik spirituality and being balanced. In this analysis I approach spirituality as a process of

communicating with spirits, regardless of whether that communication takes place within a Christian framework or outside it.

There are generally few comments on spirituality in young research partners' accounts of their perceptions of health. As I showed earlier, Julia uses a Christian frame of reference to understand why she might be imbalanced at times, explaining how Satan made her feel self-bitterness. Julia also explains how she goes to church every week with her children and is part of a prayer group that functions as a support system for her (Julia, transcript:9). Besides Julia's account, research partners are silent on the subject of spirituality and/or religion. Bonita wears a gold cross around her neck, but does not comment on her spirituality in our formal interview. In a subsequent conversation she explains that she used to go to church with her family in the village because that is what people do (03.04.14). She refers to spirituality in connection to dancing, which I will explore further in Analysis II below. Spiritual balance is referred to as a concept; one should be balanced on spiritual, as well as physical, mental, cultural, and social levels. However what exactly it means to be balanced spiritually is not explained in-depth by my young research partners. Ruth explains it in terms connected to *ellarpak*.

The young men in this tradition, specific tradition Cup'ik and Yup'ik, traditionally they used to make, shovel a lot of snow from somebody's entrance way, it's to make path for...uh or mostly houses so they make path for the animals to come and sustain them. So everything that you did traditionally had meaningful action. It already becomes a reality in the spirit world because...even I was told when you pick up a piece of, not a... when they chop wood there is kindling, little small pieces of wood that are left, then you pick them up and then the saying was that you are making a pathway (...) you are making a path for heaven, the Yup'ik heaven or Cup'ik heaven. So those are ways, so everything that you act, even when you are pregnant there were certain things that you did for the health of the fetus because we all believe that for young women especially that uh...



everything has... whatever actions you do, it becomes (...) probably one of your young women, traditionally they used to ask young women that are pregnant to go out of the house with her head first and that was an action that was preparing to have a healthy baby. That is one way you do it, by actions. So your actions have (...) consequences (Ruth, transcripts:3-4).

Here Ruth explains how the spiritual world is connected to everything that a person does: a person's actions have spiritual meaning and consequences. Notice how she also describes the Yup'ik spirituality in terms that are very agreeable with Christian ideas of a heaven. Ruth's statement also includes a reference to how people's actions have consequences on a supernatural level. Young research partners express an idea of actions having consequences. As I have described earlier, they do not talk bad about others because it might have consequences for themselves. The spiritual aspect might exist subconsciously in young adult Yup'ik women while what predominantly surfaces is the moral value that is practiced based on it. The subconscious and internalized use of a Yup'ik worldview (doxa) is here again evident. Iwasaki et al. describe spirituality as central to healing for aboriginal people in Canada (Iwasaki et al. 2005). Spirituality is described as important because it is part of the foundations of indigenous cultures and part of their heritage. Spirituality teaches one how to be good, respectful, understanding, and caring (Ibid:982).

I have shown how the *Ellam Yua* (the creator), the human/non-human, and the Universe are connected. It is a worldview that maintains that there are spirits in everything and everywhere that should be honored and respected. I will return to this point and how spirits are part of young adult Yup'ik women's practices of health in Analysis II below. For now, the aspect of spirituality in perceptions of health does not come across clearly in conversations with young research partners.

### 3.8 Community

The last theme evident in research partners' perceptions of health is community. Having a community that offers support, encouragement, and safety is central to good health. The word community should be understood here as a broad range of family, friends, co-workers, and others that research partners interact with in their lives. Hannah comments on the importance of having a social network: "I think being healthy, also means, where to get help and you have resources, uhm, available and people to lean on a little bit when you really need to, cause it's so easy to fall apart when you don't have any of that" (Hannah, transcript:5). Likewise Julia refers to having her husband's family and her aunt's family in Fairbanks, which is something "that helps" (Julia, transcript:2). Bonita describes how she just moved in with her cousin's family and that helps her now as she is going through some personal hardship (Bonita, 02.03.14).

Community, family or social networks are an important part of staying healthy however research partners do not always mention it in general descriptions of what it means to be healthy and what health is. Instead they talk about family and social networks helping them when they describe their own practices in detail. One of these is dancing that brings a Yup'ik community together, which I shall return to in Analysis II. Another situation that calls for community help is illness. Hannah relied on her parents to take care of her son when she was going through a rough period in her life. She also relied on her friends in Fairbanks to act when she needed help and was not able to realize it on her own. Sarah drew on her community as well as the public Yup'ik community when her mother went through several rounds of breast cancer and eventually a full hysterectomy and mastectomy. She was not always able to be there for her mother living far away in the village and she relied on community members as well as the Alaska Native medical system to help her mother. In fact the Alaska Native medical system might be understood as a

community in itself. I was able to observe this on a trip to Anchorage where The Alaska Native Medical Center illustrates this community in the way that it is designed to accommodate a specifically Native audience with a traditional clinic and large open spaces where people can be with their families in quiet, soothing surroundings.

Studies have shown that individuals who grow up and surround themselves with supportive families and networks and build strong community relationships become successful contributing members of society (Hild & Stordahl 2004:159). Young adult Yup'ik women rely on their personal networks of family, friends and acquaintances, but they also rely on a public Alaska Native community to help them stay healthy. As indicated above, it is predominantly in times of distress, illness, and need that social networks become important. They can be understood here as a way to help restore balance and provide support in times of imbalance.

### **3.9 Health: developing the notion**

Being healthy means being balanced for my research partners. One's balance should be understood as existing on both an internal as well as external, universe-based levels. Yup'ik cultural identity, exercise, food, stress, substance use, spirituality, and community are factors that affect one's balance in positive as well as negative ways depending on how one is keeping up with them and how they are perceived. Young adult Yup'ik women share a doxa, which explains why they share perceptions and practices of health. It also explains how and why they are incorporating traditional Yup'ik ideas into their health perceptions and practices today. Traditional Yup'ik ideas are navigated concurrently with Western ideas of health as young adult Yup'ik women renegotiate into their contemporary perceptions and practices of health both consciously and subconsciously.

In section 2.9, I analyzed existing literature on health. I found a biomedical hegemony in health literature. I have argued that an ethnographic approach to health research can constructively be used to move beyond such biomedical hegemony and approach health in a more holistic way. This study is an example of how to investigate health ethnographically. In this first part of the analysis I demonstrated how the notion of health is not based solely on the state of the physical body. Instead, seven different factors ranging from the cultural to the spiritual to the physical affect health and define the notion of health. I have also argued that health not always being approached holistically is not necessarily wrong. A study might specifically only examine one aspect of health, such as spirituality or the physical body. It is just necessary to make this clear in the study. There are many approaches to and aspects of health and here I have shown some of those different approaches as they exist for the four young adult Yup'ik women in this study. In the next section I will show how this all can be understood in connection to Yup'ik dancing when dancing is examined as a practice of health.



## **Chapter 4 Analysis II: Dancing as a Practice of Health**

I described in Analysis I how practices are sometimes used to explain perceptions of health. I learned this through interviews with my research partners and also by observation, as practices are often used to illustrate perceptions. Particularly perceptions of exercise and food include detailed descriptions of practices and my intention is not to repeat those here. Instead I find it relevant to engage in an analysis of a particular practice to show how it can contain many of the thematically analyzed aspects of young adult Yup'ik women's perceptions of health. They do not just have one practice that helps them balance one aspect of their health. Instead, one practice can help balance several or all aspects of health. This challenges the notion of health as an abstract concept as it becomes much more holistic and integrated than often assumed. In this analysis I show how dancing is a practice of health that serves all seven themes the research partners describe as central to being balanced. Health is maintained through balancing and nurturing numerous aspects of life and these can be understood as coming together in the practice of dancing. Through the practice of dancing it is shown how young adult Yup'ik women stay healthy and also how the notion of health might be understood from a new perspective.

To understand Yup'ik dancing, the atmosphere that surrounds it, and the sensations that one is left with after dancing one has to experience it. Here I provide an ethnographic description of a dance practice with the Inu-Yupiaq dancers to illustrate it as best possible on paper.

People start showing up at twenty minutes past seven. There is a laid-back but also a little nervous mood with short, casual conversations. Most people just show up and take a seat in couches or soft chairs around the room. The boys set up a line of chairs by the wall. One boy seems like he is in charge. He starts drumming and singing. It is a monotone drumbeat that fills the room and focuses everyone's attention. His voice is loud and clear as he sings a melodious and to me very unfamiliar tune. The other three boys in the room

join in the drumbeat and singing. Two young women who wear the traditional *qasperet* start dancing. They have put on white gloves from a box in front of me. All the other girls start joining in, putting on gloves and take up places in two lines on the dance floor. The boys drum and sing and the girls dance. The girls are all bending their knees to the drum rhythm while moving their arms around gesturing different activities and emotions. When a song ends everyone walks over to the sides, to chairs or couches and check their iPhones or take sips of pops, energy drinks or water. Sometimes a girl will sit a song out, texting, filming the dancing, looking at photos on her phone, etc.



Figure I: Yup'ik drum, Festival of Native Arts 2014. Photo by Cecilie Ebsen

#### **4.1 Dancing as a way to maintain balance**

Yup'ik dancing is called *Yuraq* in Yugtun. Elders explain how Yup'ik dancing has been around since the wars ended (Barker et al. 2010:54). This is not explained in terms of specific dates; instead it is a reference to sometime long ago that holds both mythical and historical

connotations. There is a story as told here by Elder Elsie of a man who went around to all the villages that had been at war with each other and he gave them drums. He encouraged the villagers to make up songs and then request songs from the other villages. People began to celebrate instead of fighting (Ibid:54-55). Theresa John likewise refers to this story calling it The Boy who Made Peace (John 2010:173). It would seem that dancing came about as a way to balance social tensions among the different Yup'ik territorial groups. Dancing is a traditional Yup'ik cultural activity. Among many other things, Inu-Yupiaq dancers explain how it was used to stay active during long, cold winters when outside activities were limited. Today that is still somewhat the case as dancing is primarily practiced from September to April (Bonita 02.03.14). Dancing is, as I understand it, also a way to balance out the cold, dark, long days of winter. Fienup-Riordan compares Yup'ik dancing today to *akutaq* (also known as Eskimo ice cream); a rich mixture of berries, fat, fish and sugar (Barker et al. 2010:6). Both *akutaq* and dancing are for special occasions, "an honor to receive and a responsibility to give" (Ibid:6).

Harold Napoleon writes that when white people first came into contact with the Inuit in Alaska, they refused to eat the food they were offered, they were appalled by the sod houses that Inuit were living in, and cautious of the wild-looking, longhaired men, women and children they encountered. However, when the Inuit started dancing, the white men, "felt the beating of the drums and were carried away by the singers, drummers and dancers (Napoleon 1996:6). They did not understand what they were witnessing but regardless of what they may have thought, they had for a time, "entered the spirit world of the Yup'ik Eskimo" (Ibid:6).

Yup'ik dancing is often analyzed in books and articles through examinations of the Yup'ik social system and Yupiit cultural values (Barker et al. 2010, Johnston 1975, John 2010). It is simply impossible to understand Yup'ik dancing without understanding the culture that it



exists within and through. Theresa John describes dancing as central to Yup'ik "socio-cultural conceptual theory, ontology, cosmology, epistemology, Indigenous pedagogy, and significant to our spirituality" (John 2010:108). Dancing is tied to everything in Yup'ik culture and everything can be understood through an examination of dancing. "Yup'ik song and dance have definite rules, but all are made to be bent. The result is great art and literature rolled into one – poetry, elegance, power, comedy, and drama" (Barker et al. 2010:6).

Yup'ik dance is flexible and adjustable to any given situation or context and is used in a variety of ways by the Yup'ik people. In Analysis I, I commented on aspects of a traditional Yup'ik worldview, *Ellarpak*, and how three realms constitute *Ellarpak*: the *Ellam Yua* (the creator), the human/non-human, and the Universe. These are all present in Yup'ik dance. I will comment on this further in the section on spirituality below, here it is merely important to note that a traditional worldview is present in dancing and so is the idea of balance.

Yup'ik dances are based on seasonal activities. In earlier times a traditional cycle of ceremonies dictated what kind of dances were performed at different times of the year. Dances had specific purposes, depending on the season, and some of them were explicitly connected to health and healing. Theresa John connects the traditional story of The Boy who Made Peace to Yup'ik health saying that music brought peace, enjoyment and social welfare to the Yup'ik people (John 2010:173). This is also the story that began the Messenger Festival. As such the whole festival might be interpreted as connected to health – which of course everything is, but in this case explicitly so. A dance that specifically enhances health is The Masked Dance *Agayuliyararput*. It enhances social health, physical wellness, and welfare for all people (Ibid:174-175).

Another important healing aspect of dancing is the drum. Drums are an important part of dance. They were traditionally made from a walrus stomach (Barker et al. 2010:58), but today they are often made from airplane fabric, which is the case for the Inu-Yupiaq dance group. The rhythm of the drum leads the dancers. Paul John describes the drum as a metaphor for the vitality of Yup'ik life:

Our ancestors were in the drum. When they were healing the sick, they used the drum. When they wanted animals to be accessible, they made masks and also used the drum. When Christian religions came around, all of our ancestors came out of that drum. When I visualize that, I believe that since we came outside the drum, we are no longer of one mind and problems have begun to beset us (Barker et al. 2010:61).

As evident in this quote the drum heals and without the drum people become lost. All Alaska Native groups have dance traditions. However, due to the late contact with outsiders, Yup'ik dances have been preserved far better than the cultural dances practiced by groups residing in other parts of Alaska. Out of the 56 villages in the region, 40 have one or more dance groups (Ibid:27). As indicated in the quote above, Yup'ik dancing was halted by Christian missionaries, who prohibited traditional dancing in many Yup'ik villages. Elder Neva Rivers from Hooper Bay recalls how Yup'ik dancing was not allowed between 1927-1946 (Ibid:6). The length of time dancing was banned varies from village to village lasting anywhere between 30 to 200 years (John 01.28.14).

Theresa John explains how Elders never share stories of how hard and depressing the ban was but it was traumatic for them since a critical part of their social well-being and infrastructure was lost for a long time (Ibid). She confirms the observation that when dance was banned balance

was lost and that balance is still being rebuilt. Dancing has been and is in many ways still being revitalized (Barker et al. 2010:24). It is a tradition that has had to be (re)invented.

Besides the beat of the drum, songs are central to dancing, which does not exist without songs. When dancing was banned people continued to sing. Elder Martina John states: “Those [dance songs] that I thought were just songs to put [children] to sleep, after I had two children, I saw them dance those songs for the first time [when they revived Yup’ik dancing]” (Ibid:107). Theresa John likewise explains how her mother’s generation found it incredibly weird when their parents suddenly started performing songs, they knew as lullabies, in public (John 01.28.14). Dances might not have been performed for a long time but dance songs were preserved and were never forgotten. Consequently, perhaps, balance was not entirely lost.



Figure II: Young dancers continuing the Yup’ik dance tradition, AFN 2013, Photo by Cecilie Ebsen

#### **4.2 Yup’ik cultural identity in dancing**

In Analysis I, I showed how Yup’ik cultural identity is a central part of my research partners’ perceptions and practices of health. I showed how the idea of balance is rooted in traditional Yup’ik knowledge and has transformed into the current idea of being balanced through

renegotiations of what it means to be Yup'ik today. By still talking about balance but on a primarily individualized and internalized level, young adult Yup'ik women have found their own way to carry on the Yup'ik culture and worldview. As such their cultural identities play an important role in how they understand health and practice health despite their own doubts about this. Dancing is a practice in which Yup'ik cultural identity is central. Theresa John explains: "(...) Dancing bonds traditional communities, enhances cultural identity, strengthens kinship lineages, and promotes the welfare of the people" (John 2010:12-13). It is a cultural practice in which things such as subsistence activities, Yup'ik songs, and the Yugtun language are explored and proudly celebrated. These are all aspects of Yup'ik culture that research partners express concern about not being able to do in Fairbanks, and all represent aspects of cultural identity. Through dancing they can express this cultural identity, for dancing provides a way to stay connected to Yup'ik culture and a way to strengthen Yup'ik identity. Bonita says:

Just the noises, the noises that come with a song, like bird noises or shooting...I don't know, just, it makes people happy. It puts smiles on peoples' faces hearing the songs. We are a young group, so you know, when I do go home, I hear, some people who have seen or heard that we have a dance group up here and they know majority, like, majority of them are students, and they are still participating in our Native dance, it makes them happy. They ask about us (Bonita 02.03.14).

The young dancers stay connected to their Yup'ik culture through dancing and they make their communities proud by doing so. Theresa John explains how, "Dancing is a great part of our life because it portrays the lifestyle of our ancestors. The songs and motions tell stories of how they hunted, how they made clothing, how they preserved food, everything else" (Barker et al. 2010:xi). Likewise she writes: "The various types of music we learned were about our feelings, kin relations, survival, and animal songs of the loon, mice, and the arctic fox. The music served

to construct the interconnected holistic perspective of the people, environment, and spirituality” (John 2010:159). Theresa John here shows how tradition is maintained through dancing and how the balance in the greater universe is nurtured through dancing. I also observe that tradition is challenged and renegotiated through dancing. One example of this comes from the AFN 2013 Quyana nights. The Quyana nights are public celebrations of Native cultures of Alaska where dance groups from all over the state come to perform and represent their respective cultural dance traditions. On the second Quyana night at the AFN 2013, the first group *Akula Elitnaurvik* consisted of young Yup’ik high school students. In my field notes I write:

They are all wearing matching outfits; the girls orange *qasperets* and fur headbands. The boys brown parkas. When you look close you can see that all the *qasperets* are slightly different with individualized beads and borders. They are all wearing gloves and mukluks. They all look serious, proud and focused. No one is smiling. They sing both old and new songs as well as a song they have written themselves. The boy in front is particularly animated and a talented dancer. The next song has English lyrics in part saying: “This is the way we comb our hair, early in the morning.” They are definitely mixing new with old in their dances – introducing the “Abdullah shake” in the last song – something that is proudly announced by the speaker.

The account shows how young Yupiit renegotiate traditional Yup’ik dancing in new, contemporarily relevant ways as they are combining Yup’ik dance moves with pop culture dance moves and the Yugtun language with the English in their lyrics. The “Abduallah-shake” indicates a certain amount of globalization in the young Yupiit’s use of dancing as does the English lyrics “This is the way we comb our hair.”

As the above account shows and Bonita explains, dancing is a way for young people to express their culture and be proud of it. To be proud of one’s indigenous culture is not always a simple matter. Through colonial processes many indigenous people have been taught to be

ashamed of their culture, to suppress it in favor of Western cultures. Colonialism has had major effects upon Yup'ik identity and how Yupiit perceive themselves. As I have stated earlier, missionaries banned dancing in Yup'ik villages creating an understanding of dancing as something bad and backwards for a long time. There are still a few villages that do not practice dancing because of this. As described earlier, Wexler looks at the effects of colonialism among young Inuit in North Alaska. She argues that Inuit youth internalize colonial categories and judgments making them feel inadequate to the point where they lose the will to live (Wexler 2009:1-2). Modern forms of oppression are embedded in social institutions and structures that reflect Western values. The reality that Sadie Brower Neakok struggled with in the 1970s and 1980s are echoed in Wexler's article:

Young villagers have exposure to global media, yet live in settlements not connected to 'the outside' by roads. Their grandparents know how to speak Inupiaq and to live a subsistence lifestyle, while many of them neither speak the Inupiaq language nor participate in traditional subsistence activities. They are expected to succeed in school yet know that they won't need many of these skills in their home communities (2009:8).

The exposure to global media and its pop culture lifestyle does not fit with the life that young people lead in remote Alaskan villages. There is a constant mismatch between what they think should be and what is (Ibid:16). Wexler argues that the high circumpolar suicide rates are a result of such disjuncture as:

Healthy pathways are thwarted by cultural discontinuities and active oppression. Young people do not see possibilities for the future because they have been taught to understand their past and present through a colonial perspective: the struggles of their family members and neighbors are understood as personal and collective failings, not the results of oppressive belief systems and structures (2009:17).

Young adult Yup'ik women living in Fairbanks have access to a broader spectrum of opportunities and I do not observe the extreme level of hopelessness that Wexler finds among Inuit youth in North Alaska. However I do observe a struggle to maintain a Yup'ik identity in a predominantly Western society in Fairbanks and it is obvious that dancing provides an opportunity to move beyond cultural discontinuity as well as personal and collective failings. Dancing is a positive, beautiful, inspiring Yup'ik practice that helps young adult Yup'ik women (and men) to be proud of their heritage and promote it to the world. At the same time young Yupiit are also using dancing as an opportunity to combine their Yup'ik culture with Western pop culture and in this way renegotiate what it means to be Yup'ik in today's world. It helps them to make sense of their cultural context at once Yup'ik and Western. Theresa John explains saying:

From my understanding of my grandmother's words, I am an integral part of the interconnected complex web of the creator, the universe, and the human and non-human world called the *Ellarpak*. Dance as a way of connecting the past to the present and future embodies the essence of my Indigenous construction of knowledge and the identity of who I am and who my people are through ritual and ceremony (John 2010:13)

Through dancing she is able to maintain her Yup'ik identity. Wolsko et al. (2007:58) examine how cultural identity and acculturation affect wellbeing. They find that Yupiit who continue to live a traditionally oriented lifestyle are less stressed and happier than Yupiit who have adopted more Western lifestyles. They argue that, "enculturation may have positive mental and behavioral health benefits in this population" (Ibid). In connection to my research partners' statements and my observations of dancing I find a similar indication. Young adult Yup'ik women (and men) are happier and less stressed after participating in dancing.

### **4.3 Dance as exercise**

Yup'ik dancing requires a constant bending of the knees and wide, repeated movements of arms, shoulders, neck, head, and upper torso. Songs are often long (longer than the average American country song of 3.5 minutes), and contain many verses. Breaks between songs are short, leaving little time to rest. Yup'ik dancing is, in other words, a form of exercise. It gets the pulse going, the blood running, and tension is released through the many, varied movements of the upper body. Theresa John writes: "The dance as an exercise has a positive impact on the body (...) Dancing supports and even constitutes physical wellness because the rhythmic music embraces social coordination and movement in unison of the head, arms, legs, body, and soul" (John 2010:172, 175). Exercise is a vital part of this study's four young adult Yup'ik women's perceptions of health and dancing is one way of exercising. Bonita lists it as her primary exercise. She feels healthier after having moved around because it balances out already existing negative impacts made on her body as well as her mind (Bonita 02.03.14). Theresa John describes how, "You are moving joints and muscles, using lungs, head, legs, and everything moves in unison, in sync" (John 02.11.14). Dancing is a physical exercise that helps to keep one balanced. As shown in Analysis I, exercise not only balances the physical body but also the mind and soul. This might be particularly true for dancing as all the central aspects of being balanced are represented in the dancing.

### **4.4 Food in and around dancing**

As I attended Inu-Yupiaq dance practices it became clear that food plays a role in dancing. First of all, several of their dances are about hunting, gathering and preparing foods, for subsistence activities represent a general theme in Yup'ik dances and songs. As I have described earlier, I do not understand Yupiit songs, as I do not speak Yugtun. My observations and



interpretations are primarily based on dance motions. One of their dances has repeated motions of shooting a rifle upward as when hunting birds. Another motion in a dance is hauling in a fish net. Such dances help to preserve knowledge of how to hunt and prepare food on the land. Dances guide young adult Yup'ik women in what kind of food they should eat: what kind of food is healthy and culturally important.

As shown in Analysis I, subsistence food is not readily available to young adult Yup'ik women in Fairbanks. However a number of Yup'ik foods are shared at dance practices including moose stew, *akutaq*, salmon and fried bread. This does not happen every week, but whenever someone feels like they have something to share they bring it to practices. The food that people bring is subsistence food. It is healthy, nutritional food that has been prepared at home or at fish camps – such as dried/smoked fish. Everyone is encouraged to eat the food that is brought and whoever brought it is thanked and complimented on the food. In this way dancing becomes a gateway for eating Yup'ik food. It is an opportunity to get food that is otherwise not easily available for young adult Yup'ik women and it stimulates feelings of Yup'ik identity.

The first time someone brought moose stew I was unsure of whether it was okay for me to eat it too. When I hesitated I was proudly encouraged to try some and asked if I did not like it since I did not immediately get up to take some. During another practice I tried *akutaq* and the dancers next to me thought it was hilarious to see me try it and also explained to me that it was made out of white fish and blue berries and that it is the best food in the world.

While food in perceptions of health is connected primarily to nutritional value, access, and taste, at dance practices it becomes primarily about cultural identity, as it is young Yup'ik men and women proudly sharing Yup'ik food. Food is also a way to bring people together regardless of whether they are participating in the dancing or watching the dancing. It is a way

to continue the Yup'ik tradition of sharing with the community. As "Elders say, 'those who share are given another day', implying a long and healthy life" (Barker et al. 2010:31). People might not have their families and neighbors to share with as in villages, so instead they share with their fellow dancers. In this way they have found a way to renegotiate and transform a traditional practice into something relevant for their lives in Fairbanks.

#### **4.5 Dancing as stress relief**

In Analysis I, I showed how stress affects balance negatively. In connection to dancing Bonita explains stress as follows:

I have to say it [dancing] is my stress reliever. I can go in not feeling the greatest but I can leave feeling amazing (...) I keep referring back to stress because there is a lot of it that comes and goes (...) That is where Native dancing comes in. It is a good counterbalance for, you know, a lot of the stresses in my life right now (Bonita 02.03.14).

Dancing is a way to relieve stress as well as any other mental issues that a person might be dealing with. Stress is relieved through the mere action of doing physical exercise but it is also relieved through the laughter and lifting of spirit that is inherently part of Yup'ik dancing. "Listening to music and laughter in performance helps the mental health of the human" (John 2010:172). Dance practices as well as performances are filled with laughter. At practices dancers are laughing at mistakes they make during dances. They laugh at silly things that happen in the practice room. They laugh at things on their phones or things that they are whispering about with each other. At one particular practice a girl gathered her things and headed for the door during a break between songs. She was in a hurry to get out before the next song started and was not planning on saying goodbye, as it can be intimidating to have to yell goodbye to a room full of people. She almost made it to the door when one of the boys yelled "Goodbye" after her and everyone turned to stare at her as she was forced to turn around and mumble goodbye in return.

The whole room broke out in laughter at that point. Another time a girl moved an item on a table and it made a funny sound, which made everyone laugh. Generally, any opportunity for a good laugh is seized.

At dance performances roars of laughter accompany funny songs and dance movements. Here people do not laugh at mistakes and embarrassing moments but at humorous lyrics, movements and gestures that are purposefully part of dances. I experienced this first hand at the AFN 2013 Quayana nights where, among others, the group *Akula Elitnaurvik*, as described earlier, performed. They had a dance about driving a car that they had written themselves. The dance goes like this: they get in their car, shut the door and put on their seatbelt. They turn the key in the ignition. The car does not start – it just stalls out. They try again and again. Finally it starts and it is just so awesome that they cruise along “ghetto-style” to the point where the car gets out of control and they crash or stall out having to start all over. It was hilarious and the whole Carlson Center was screaming with laughter including myself. It was my impression that everyone was simultaneously letting go and afterwards I felt tired and very relaxed.

Dancing is a way to manage stress both for dancers and audiences. Theresa John writes: “And they are also entertaining with each other and laughter is a good medicine...and it’s very healing (...) It’s a good mental health exercise...cleansing...it lightens you up” (John 2010:172). As Theresa John explains here, laughter is a way to mentally cleanse oneself and heal oneself both as a participant and a spectator. Besides being a way to get rid of stress, dancing is also a way to prevent and fend off any potential stress. “Dancing is a way to avoid emotional and psychological depression” (Ibid: 158). It is preventative and can protect against imbalances before they occur as well as restore balance after imbalances have occurred.

#### **4.6 Dancing as a break from substance use**

One or more dancers drink energy drinks and sodas at every practice in the Inu-Yupiaq dance group. This might be a result of the popularity of such drinks among college students. CANHR researcher Monica Skewes et al. (2013) conducted a study on energy drink consumption among college students at University of Alaska Fairbanks and found that 39.2% of the participants in the study consume energy drinks at least once a week. As shown in Analysis I, young adult Yup'ik women define energy drinks and soda as unhealthy and also as an inherent part of village life today. Julia, as described earlier, explains how she used to drink them a lot when she was younger and many of the dancers I observed drinking them are also younger than Julia. Energy drinks and sodas might here be used to keep dancers going. Practices are from 7-9 pm and from 6-8 pm and many have not had dinner or are tired from long days of classes.

A few dancers are observed to walk outside to smoke, but sometimes they also just walk outside to talk on the phone or meet up with someone. Generally people wait until after practices to smoke. Alcohol is not consumed during practices or at dance performances such as AFN or the Native Arts Festival at UAF. These all take place in locations where alcohol, as well as smoking, is not permitted. Comments on someone's absence due to them being at the UAF pub are observed in a somewhat negative tone. Several dancers enjoy going out to bars and drinking alcohol or smoking but not during dance practice hours. Dancing as such is a moderating force of substances. It functions as an alcohol- and tobacco-free break from lives where alcohol and tobacco otherwise might play a role. Dance practices and performances are times to not drink, to not smoke for young adult Yup'ik women in Fairbanks. It is a way to take a break and stay away from damaging substance use/abuse.

## 4.7 Spirituality in dancing

In Analysis I, I commented on how research partners do not describe in-depth what spirituality means for health and how to stay healthy. In connection to dancing it becomes clearer why this is difficult to put into words. Bonita explains:

It is not everybody at once that are gonna feel the spirits while they are dancing but sometimes you just uhm...a dancer might...just go all out and they are just, they are feeling it. It's a different kind of feeling inside it is indescribable in words (...) It's very touching when you can tell, somebody is dancing, kind of like for the spirits. My own perspective is that whomever you are named after is who you are dancing for. I am named after my uncle and apparently he was a goofy guy and you know, sometimes I just can't help myself and I go all out. The connection, it's amazing, it's a wonderful feeling. It's just one of those things that you have to feel it to be able to understand it (Bonita 02.03.14).

Thus, to Bonita, dancing is way to connect with ancestral spirits: to connect with the person from whom one got their name: to connect with the past. Health is enhanced through spiritual connections because it connects young women to their ancestors; their culture, and it helps them to let go and “go all out” for a little while. Bonita further explains how, “You go in and you feel lifted, you feel much better than when you first walk in” (Bonita 02.03.14). Some explain dancing as a form of prayer: “Dancing is the form of prayer for all people to cure illness and to request for prosperity in *yuuyaraq* [epistemic worldview]” (John 2010:176). Dancing is a way to connect to the Yup'ik spiritual beliefs in a way no other aspect of contemporary life can do. It is a way to stay in contact with ancestors' spirits. Within the circle of the drum ancestors' spirits reside and when they dance and sing and drum the ancestors come out and join them in the dancing (John 01.21.14). Dancing is a way to communicate with the spirits and stay connected with the wider Yup'ik universe as well as the Creator.

During a dance, women wear gloves to keep bad spirits from entering them during the dance. This is very much a requirement for anyone who dances and a communal box of gloves are put out for anyone to use during Inu-Yup'iaq practices. Other dance groups expect you to bring your own gloves and will not let you participate if you do not have them. The connection between a traditional Yup'ik worldview and some of the moral values that young adult Yup'ik women live by today becomes evident in dancing. Here is a cultural activity that actually teaches about the spiritual world and connects to the spiritual world that is the foundation of a good Yup'ik life. By practicing dancing young adult Yup'ik women stay connected to the Yup'ik spiritual world in a contemporary relevant and traditionally respectful way. Anthropologist Lynn Price Ager (1975:7) argues that the purpose of dancing is social and recreational. It used to be religious but since Christianity was introduced to the Yup'ik region that context has disappeared. This is not what I observe at dance practices and performances. Spirituality is very much a part of Yup'ik dancing today.

#### **4.8 Community of dancers**



Figure III: Audience and dancers joined in dance on stage and in front of stage, AFN 2013. Photo by Cecilie Ebsen

In Analysis I, I analyzed the importance of community support for health. I showed how research partners rely on a personal family, friends and acquaintances and also on a public Alaska Native community to help them stay healthy. Dancing is another way to build up and become part of a community. Bonita states: “We get to know each other’s personalities (...) we all just hang out every day. I can honestly say that those are all my friends, cause I don’t think I really hang out with anybody out of the dance group (...) we all have the same hobby” (Bonita 02.03.14). Bonita notes that this is also because they all take classes together, and are part of the Alaska Native and Rural Development Department at UAF. Theresa John writes:

Cause when you’re all together, the drums are going, the singing, the dancing and even the audience I think the whole atmosphere everyone comes together and you leave feeling just wonderful (...) Dancing is a way to live cohesively, with one mind and as one family (...) Dancing is a form of bonding social relationships (John 2010:157, 168).

As Bonita explains, the other dancers in the Inu-Yupiaq dance group have become her best friends; her family, here in Fairbanks. Through dancing one becomes part of a community even when far away from home. This community is personal but sometimes it extends to the public. Dancing brings a Yup’ik and a broader Alaska Native community together during public performances as children, adults and Elders come together in a fun and positive environment. The Qujana nights during the AFN and the Festival of Native Arts are examples of how dancing brings together not only a Yup’ik but also a broader Alaska Native community. Dance groups from around the state: Inupiat, Athabascan, Cup’ik, Yup’ik, Dena’ina and Tlingit groups, perform for each other and are equally applauded and celebrated. Many groups end their performances with “walk-ons” where the audience is encouraged to come on stage and dance with them. Here Inupiat and Yup’ik dancers join Athabascan and Tlingit dancers enthusiastically

learning each other's dances. Everyone comes together and form an Alaska Native community. Traditionally dancing is a way to make sure that everyone is taken care of. Frank Andrew discusses this:

Dancing should not have been removed from our traditions. I saw that *yuraryarat* [ways of dancing] helping people in my village-orphans, widows, and those who didn't have anyone to provide for them. When they danced, they presented goods for them to use, tools for fishing, kayaks for those who didn't have anyone to take care of them. They gave them away and didn't ask for payment. That is how dancing took care of people (John 2010:42).

Thus, dancing is an opportunity to give to those who are in need. The Inu-Yupiaq dance group does not exchange goods however before performances they make sure that everyone has dance outfits like *qasperets* and if not, they have a workshop where the girls who can sew them help those who cannot.

Yup'ik communities are not disappearing even though they are changing and Western structures are adopted. Instead they are being renegotiated and transformed into new Yup'ik communities that Yup'ik people can participate in regardless of whether they are in a rural village, an Alaskan city or somewhere else in the world. Dancing and the way it is practiced today, is an example of such renegotiation. People can dance anywhere and use it as a way to maintain their Yup'ik identity.





Figure IV: Festival of Native Arts Logo, 2014. Photo by Cecilie Ebsen

#### 4.9 The notion of health: dancing

In the second part of my analysis I have shown how dancing is a practice of health that includes all of the seven factors this study's four young adult Yup'ik women perceive as important for staying healthy. First of all this should be taken to mean that dancing is a healthy activity to participate in. It helps young adult Yup'ik women (and men) to maintain strong ties to Yup'ik culture and spirituality. It is a way to exercise. Yup'ik food is shared at dance practices, while substance use is temporarily paused. Stress is relieved through dancing, and dancing fosters strong communities where young adult Yup'ik women help and support each other. Second, dancing might be understood as a metaphor for the notion of health itself as it is a practice that serves a long list of purposes. Like the notion of health, dancing can be understood as so many

different things that are not always exhaustively covered in examinations of it. Here I have only looked at the aspects of dancing that relate to staying healthy, as four young adult Yup'ik women perceive it. However, dancing is a practice that serves a range of purposes related to survival on the land, education, economic stability, social infrastructure, etc. Just as the notion of health is based in a range of aspects that all contribute to keeping one healthy, dancing includes a range of Yup'ik societal aspects that together provide a framework for Yup'ik society. They might not all be examined at once but they exist and it should be acknowledged in order to grasp how broad such concept really is. Dancing is not just a social activity as Ager (1975) once argued. It should be understood as a holistically based practice that serves a number of purposes; one of them being health.

Likewise, health is not only one thing, but also a holistically based notion that is defined by a number of factors.



## **Chapter 5 Conclusion**

Through the examination of a group of urban young adult Yup'ik women's perceptions and practices of health I have found that these are grounded in the notion of balance. It is a notion that is explained as striking a balance between excess and deficit. Having too much or having too little of something will cause imbalances in one's life. This should be understood as referring to both literal and abstract levels. The notion of balance is these young adult Yup'ik women's notion of health. Balance is affected by a variety of factors or alternatively explained: a variety of factors need to be in balance for a person to be balanced overall. I have identified seven factors, positive and negative, of special importance in relation to the maintenance of a balanced life: 1. Yup'ik cultural identity: staying connected to traditional cultural practices and Yup'ik values; 2. Exercise: for example walking, jogging, or dancing to keep the physical body as well as the mind healthy; 3. Food: eating non-processed, home-cooked, whole produce food and traditional Yup'ik food when available; 4. Stress: avoiding stress and making sure to counteract stressful periods by for example exercise, or mental and spiritual outlets such as laughing; 5. Substance use: alcohol, tobacco, sugar and caffeine are considered unhealthy but at the same time they can be used to relieve stress; 6. Spirituality: staying connected to ancestral spirits as well as a creator, contribute to being balanced; and 7. Community: having a social network of family and friends that can support and guide in times of imbalance.

The young adult Yup'ik women's perceptions and practices of health are centered on these seven factors. In connection to these, two major trends may be identified concerning the notion of balance. First, although my young adult Yup'ik research partners have different life stories: different family relations, different childhoods, different dreams and goals, they share the

notion of balance. When asked what it means to be healthy they all describe it as a matter of being balanced. This might be attributed to sharing what Bourdieu calls doxa. Doxa should be understood as a practical sense: The idea of balance is instilled in young adult Yup'ik women as a practical sense. Their shared doxa is grounded in their habitus. It is the traditional Yup'ik knowledge that exists in their ideas of health without them being conscious of how they developed, and why they follow, the notion of balance. There is a clear divide in habitus between Sarah and Hannah on the one hand and Julia and Bonita on the other. Sarah and Hannah have grown up partly in urban Alaska, have non-native fathers and complicated relationships to their Yup'ik mothers. By contrast, Julia and Bonita have grown up in rural villages, have two Yup'ik parents and a well-balanced relationship to them. Despite their differing habitus, they all share the idea of balance: they all share doxa.

Second, a renegotiation of traditional Yup'ik knowledge is evident in my young research partners' notion of balance, which is why it is not immediately clear that their idea of balance stems from a traditional Yup'ik worldview. The idea of balance can be traced back to a traditional Yup'ik knowledge system where balance in the greater universe between humans/environment and spirit worlds was crucial to the Yup'ik people's survival. Today maintaining a balance in life is also what my research partners identified as crucial for staying healthy. This renegotiation is important to note because it shows how young adult Yup'ik women are managing to maintain a Yup'ik identity while mixing other cultural ideas and practices with the Yup'ik. They are not hopelessly losing their Yup'ik identities, as some elders worry. Instead they are renegotiating what it means to be Yup'ik in an urban Alaskan context. Balance is predominantly described on an individual, internal level although still keeping with aspects of community and sharing. Through a reconfiguration, these young adult Yup'ik women have found ways to continue to use

the Yup'ik notion of balance. A notion that is evident in both their perceptions and practices of health. The four young women interviewed in this study are some of the strongest of their generation and their abilities to renegotiate and preserve their Yup'ik identities should be understood as those of role models.

Dancing can be understood as a practice of health and it includes and serves all seven factors identified above, all affecting one's balance: 1. Dancing supports/enhances a strong Yup'ik identity in both dancers and audience; 2. It is a form of exercise; 3. Traditional food is shared at dance practices; 4. Stress is relieved through dancing; 5. Dancing is a break from tobacco and alcohol; 6. It provides direct contact to the spiritual world; and 7. Dancers form communities with each other. In dancing the idea of balance exists as dancing serves all aspects that the young adult Yup'ik women in this study describe as central to good health. Dancing simply makes people balanced. The renegotiation of what it means to be Yup'ik today, where different cultural ideas are mixed in new ways, is also evident in dancing as young dancers mix English lyrics with Yup'ik lyrics and sing about global topics such as cruising "ghetto-style" in cars or incorporating the "Abdullah-shake" in their dance.

Dancing can also be understood as a metaphor for the very notion of health as it includes all the factors that are central for the notion of health. By showing how dancing includes all these different aspects I also show how the notion of health might include many different aspect and that the notion of health is at its core holistic. The semi-structured interview framework and the holistic, broad approach to the notion of health function as examples of how health can be examined and researched in a way that is not bio-medically determined. It is an approach that has proven to bring out in-depth, personal accounts of what it means to be healthy for young adult Yup'ik women. A biomedical approach to researching health might be beneficial in

identifying and assessing health issues but it rarely moves beyond the identification phase and does not provide a basis for solving those issues nor do they identify the many factors beyond physical facts that make up and affect health. The ethnographic approach can provide a basis for such extended analysis as this study shows.

This study provides a particular cultural perspective on what health means for a small, urban group of young adult Yup'ik women. The notion of balance that I have found to be central for all four young research partners can however be applied more broadly to Yup'ik women as it fits with what has been found in other studies on Yup'ik health: Yup'ik people today base their notions of health on a traditional worldview and on traditional cultural practices (Wolsko et al. 2006). Similarities to studies on perceptions and practices of health outside the Yup'ik area are found that indicate a broader, specifically indigenous approach to health. As shown in this study, Wiscoft (2010) and Fredericks (2003) also find that indigenous people (in Greenland and Australia), respectively understand health as a balance act with a range of factors affecting and feeding into that balance. Wolsko et al. (2006) and Kirmayer et al. (1994) find many of the same factors that this study lists as central to indigenous health. Research partners resonate the perceptions as found in these studies when they describe eating traditional food, maintaining spiritual connections, and being in harmony with nature as aspects of staying healthy. I have found them to describe these on predominantly individual levels and with a certain amount of reconfiguration as explained above. These similarities between different groups of indigenous people's perceptions and practices of health indicate a shared indigenous approach to health and how to stay healthy that is centered on a holistic idea of balance.

Why this shared idea exists should be examined further than what I have done in this study. Saying that these different groups of indigenous people have similar ways of thinking

about health does not necessarily mean that there is something essentially indigenous. Instead it indicates that there is a shared discourse within indigenous communities: a discourse that might be political, economic and social as well as cultural. In particular, a political motivation for emphasizing and maintaining a traditional indigenous worldview, including harmony with nature and spiritual worlds, might be examined further to understand why there seems to be a shared indigenous idea of health. However in this study the focus has primarily been on how young adult Yup'ik women think about health.

My analysis is a contribution to a growing body of work that shows how young adult Yup'ik women think of health as a holistically based balance. This study contributes to health research on Yup'ik people as well as a broader category of indigenous people. The analysis of perceptions and practices of health show how important it is to understand notions of health in relation to particular cultural groups, as they can be very different.

This study also contributes to the ethnography of Yup'ik people. It shows how traditional Yup'ik worldviews are still present today in new ways that younger generations use to navigate today's world and it shows how dancing is a central practice both in health and in Yup'ik culture today, just as it was a century ago.

This study should be understood as a pilot study for studying young adult Yup'ik women's perceptions and practices of health. It is an initial examination of them and future studies might include a much broader examination of both urban and rural Yup'ik women's perceptions and practices of health as well as an in-depth study of dancing as a practice of health. In terms of other future directions for this study I asked my four research partners what they believe are the most crucial topics to examine in regard to Yup'ik health today (Appendix III). Their answers focused on how to make young people and children's lives better today both on



emotional and community levels. I believe that at the basis of all of their answers lies the realization that before working on any of such issues, an understanding of what it means to be healthy is necessary. I recommend all of their ideas as relevant and crucial to use in future studies of Yup'ik women's health. I also recommend that such studies be approached with the Yup'ik idea of balance at their foundation: examining how to make young people and children's lives balanced and continuing to examine how balance is maintained and improved among Yup'ik people in Alaska.

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## Appendices

### Appendix I: Informed consent form

#### Perceptions and practices of health among young adult Yup'ik women

IRB #397716

Date Approved: 03.08.2013

#### **Description of the Study:**

My name is Cecilie Ebsen and I am from the University of Alaska Department of Anthropology. I am asking you to take part in a study about health and how to stay healthy. The research is partly funded by the James Crook Memorial Fund supporting studies of Environmental Health. You are being asked to take part in this study because you are a Yup'ik woman.

The goals of this study are:

- To understand young Yup'ik women's ideas of health (the first step to good research on health is to understand what health means to *you*)
- To describe what practices Yup'ik women use to stay healthy
- To find out where and from who young Yup'ik women learn about health. Are there any differences between rural and urban perceptions and practices of health?

If you are 18 years or older and if you accept, I will ask you to share your ideas and understandings of health and what you think it means to be healthy. There are no right or wrong answers to the questions I will ask you. It is an open discussion of what health is and how to keep it. You are invited to ask any questions you may have now or at any time during your participation.

If you choose to participate in an interview you may spend between 30 minutes and 3 hours speaking with me. You may also take me to places that you feel improve or affect your health. You may also show me things that help you stay healthy.

#### **Risks and Benefits of Being in the Study:**

The risks to you if you take part in this study are minimal. If you feel uncomfortable during an interview with a question or a topic of discussion, you may choose not to answer. You can choose to skip a question or end the interview at any time.

The benefits to you for taking part in this study are a chance to help understand what health means to young Yup'ik women. Your ideas of health and how to stay healthy can contribute to a greater understanding of Yup'ik health today.

#### **Confidentiality:**

The interviews, pictures, and surveys resulting from this project will be kept at the UAF Department of Anthropology during the life of the project. Copies of your interview(s) and any reports using it will be provided to you, if desired. Data may be used in posters, presentations, and publications but you will not be individually identified unless you want to. If you do not want to be identified, I will protect your confidentiality by using a cover name (pseudonym).

Please initial one privacy level:

\_\_\_\_\_ You allow me to identify you in my reports/presentations/publications

\_\_\_\_\_ You would like to remain anonymous in my reports/presentations/publications

**Voluntary Nature of the Study:**

Your decision to take part in the study is voluntary. You are free to choose whether or not to take part in the study. If you feel uncomfortable for any reason, you can stop an interview and/or request to be removed from the study at any time.

**Contacts and Questions:**

If you have questions now, feel free to ask me now. If you have questions later, you may contact the PI for this project at any time:

Patrick Plattet, Assistant Professor, Department of Anthropology, University of Alaska Fairbanks, POB 99775-7720, Fairbanks AK 99775-7720, 907-474-6608 (phone), 907-474-7453 (fax), pplattet@alaska.edu

If you have questions or concerns about your rights as a research participant, you can contact the UAF Office of Research Integrity at 1-866-876-7800 (toll-free) or fyirb@uaf.edu.

Cecilie Ebsen, Master Student, Department of Anthropology, University of Alaska Fairbanks 1451 Farmers Loop Road, Fairbanks, AK 99709, 907-322-1451 (phone), crebsen@alaska.edu

**Statement of Consent:**

I understand the procedures described above. My questions have been answered to my satisfaction, and I agree to participate in this study. I have been provided a copy of this form.

---

Printed name of Participant

---

Signature of Participant &  
Date

---

Printed name of Person Obtaining Consent

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Signature of Person Obtaining Consent & Date

## **Appendix II: Interview questions**

### **Introductory questions**

- How old are you?
- Do you consider yourself “young”?
- Did you grow up with your parents?
- Do you have any brothers and sisters?
- Do you have children?
- Do you work/study?
- What kind of place did you grow up in?

### **Questions about perceptions of health**

- What do you think it means to be healthy?
- How would you describe what it means to be healthy to you?
- What English terms/words best describe “health” in your view?
- For speakers of native language: How would you translate “health,” “healthy,” “being healthy,” etc., in your native language?
- Who is healthy and why?
- Who is not healthy and why?
- What is health?
- I wonder if you could share any stories about health?
- Illness: what does it mean to be ill?
- Do you think it is taboo to talk about illness/being sick?

### **Questions about transmission of knowledge of health**

- Who taught you about health?
- Who taught you how to be healthy?
- What did they teach you?
- Are your ideas of health different from your mother’s/father’s? Your grandmother’s/grandfather’s?

### **Questions about practices of health**

- Do you try to stay healthy? How?
- What do you do that is healthy?
- Do you do any unhealthy things? (We all do...)
- Do you know anybody who is especially healthy?
- Why are they healthy?
- What is your relationship to that person?
- How were you affected by their ideas of health?
- Dancing: what does dancing mean to your health?
- Can you describe in detail what happens to you when you dance?
- How do you feel after dancing?
- Why is dancing important to you/Yupit?
- Would you say that you can call dancing a practice of health?
- What does being together with other dancers mean to you?
- Is dancing ever not healthy?
- How is dancing connected to balance?
- How do you keep your family healthy?
- How does your community stay healthy?
- Where do you shop for food? Where do you get your food?
- Do you go to the doctor or do you call a relative when you get sick? For example, do you call your mom and talk about what's going on before you seek medical treatment?  
Do you use any forms of traditional treatment?
- Is health always connected to your body?
- If you could do a study of health about young women like you, what would it be about?
- What do you think is important to focus on?
- What do you think is most important?
- Do you ever feel like other people have a different idea of health than you?



### **Appendix III: Future studies on health as recommended by research partners**

At the end of each interview I conducted, I asked my Yup'ik partners what they would like to research if they could do a study of health. Here I would like to list the answers as suggestions for future studies of health that are of great importance to them.

Hannah recommends a study on parenting. A study that investigates what it means to be a good caretaker. So many Alaska Native youths get caught up in criminal issues, health issues, psychological issues and unemployment issues and she wonders if these might be connected to how parents (fail to) raise and take care of their children (Hannah transcript:8-9)

Sarah recommends examining emotional health in-depth. To look at the connection between physical and emotional health where the body is a messenger of the internal, emotional well-being (Sarah, transcript:8).

Julia recommends doing a study on what would encourage young Yupiit to have a better life; a study that looks at how they would improve their quality of life (Julia transcript:12).

Bonita recommends continuing to develop projects like the CANHR Qungasvik toolbox; a project that aims at developing practical tools and recommendations for how a community can overcome a specific problem or improve a bad situation. Develop ways to overcome substance abuse in rural villages.

## **Appendix IV: Interviews**

### **Bonita**

03.02.14 Interview by Cecilie R. Ebsen at UAF. Transcript in possession of Cecilie R. Ebsen

### **Sarah**

04.13.13 Interview by Cecilie R. Ebsen in Fairbanks. Transcript in possession of Cecilie R. Ebsen

### **Julia**

05.06.13 Interview by Cecilie R. Ebsen in Fairbanks. Transcript in possession of Cecilie R. Ebsen

### **Hannah**

04.04.13 Interview by Cecilie R. Ebsen in Fairbanks. Transcript in possession of Cecilie R. Ebsen

01.15.14 Interview by Cecilie R. Ebsen at UAF. Transcript in possession of Cecilie R. Ebsen

### **Ruth**

11.27.13 Interview by Cecilie R. Ebsen at UAF. Transcript in possession of Cecilie R. Ebsen

### **William**

11.03.13 Interview by Cecilie R. Ebsen at UAF. Transcript in possession of Cecilie R. Ebsen

### **John, Theresa**

01.21.14 Class discussion at UAF. Transcript in possession of Cecilie R. Ebsen

01.28.14 Class discussion at UAF. Transcript in possession of Cecilie R. Ebsen

02.11.14 Class discussion at UAF. Transcript in possession of Cecilie R. Ebsen